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COVER LETTER

то:	Registration Sect Division of Corpo		Sec.	
SUBJI	ест: <u> </u>	ER GROUP IN Name of Limit	Z, Z, L, Control (ited Liability Company	
The er	nclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please	return all correspond	ence concerning this matter	to the following:	
		•	HER manager Name of Person	
		UstleR GA	Paup II LLC Firm/Company	·····
		800 N.O.	EAngE AVE Su.	TE 200
		ORRANdo	FL 32801 City/State and Zip Code	
		Sharon C	PustleR.NET to be used for future annual report notifi	
For fu	rther information con	E-mail address: (cerning this matter, please ca		ication)
	SHARIN	Ellis	at (407) 839-1 Area Code Daytime	070
	Name of F	erson	Area Code Daytime	Telephone Number
Enclo	sed is a check for the	following amount:		
€ \$2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Company as it now appears on our records. (A Plonda Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Feb 23, 2014 and assigned Florida document number 116 000 42792 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter life name of the registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: **Registered Office Address** **Planda** **Plorida Street address** **Plorida Street address** **Planda** **Plorida Street address** **Planda** **Planda	Ustlea GROW	II, LLC		
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:	(Name of the Limited	d Liability Company as it now appears on A Florida Limited Liability Company)	our records.)	
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:			6 23, 2014 and	d assigned
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New Registered Office Address: 800 N. ORangs AVE Suct 200 Enter Florida street address Ollando, Florida 32801	Name of New Registered Agent:	CRA: q Ustiza	LORIG	P was
Oflando, Florida 32801	New Registered Office Address:	800 N. ORAngs. Enter Florida:	AVE Suite 2	oc
City Zip Code		Oplando	, Florida	280 /

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records;

MGR = M $AMBR = A$	lanager uthorized Member		
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