LIL 000056678

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	ə #)
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u> </u>	1 Estate H	oldings	· · · · · · · · · · · · · · · · · · ·
(Name of the Lim	(A Florida Limited	anv as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Florida document number <u>LL 6999956</u>	Liability Compan	y were filed on March 21,201 6	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited lia	bility company here:	
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	E BOX)		
B. If amending the registered agent and registered agent and/or the new registered of			nter the name of the new
Name of New Registered Agent:	MARIANA	ORIHUELA	JON - 4
New Registered Office Address:		Enter Florida street address	
		, Florid	5 <u>2</u> & 77
•		City ,	Zip Code

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
M6R	MARIANA ORIHUELA	3800 SW 34th Street # P127	G Add
		GAINESVILLE, PL 32608	Remove
			Change

			Remove
			Change
			□ Remove
			Change
			Add
			Remove
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***************************************			Add
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			Change

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		(A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B
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Effective date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot be prio Note: If the date inserted in this block does not meet the applied document's effective date on the Department of State's records	or to date of filing or more than 90 da cable statutory filing requiremer	(optional) ys after filing.) Pursuant to 605.020 nts, this date will not be listed a
e record specifies a delayed effective date, but no The 90th day after the record is filed.	ot an effective time, at 12	2:01 a.m. on the earlier o
Dated May 20, 2016	·	
Signature of a member or authority CRISTIAN ORILL	norized representative of a member	

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Filing Fee: \$25.00