## L16000135922

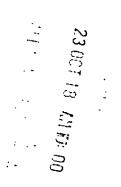
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## **COVER LETTER**

TO:	Registration Sec Division of Corp		,			
CUD IT		OPERTIES, LLC		•		
SUBJEC	-1:	Name of Limited Liability Company				
The encl	osed Articles of	Amendment and fec(s) are sub-	mitted for filing.			
Please re	turn all correspo	ndence concerning this matter	to the following:			
		Danielle L. Vaughn				
			Name of Person			
		Vaughn Law PLLC				
		Firm/Company				
		Address				
		City/State and Zip Code dv@dvaughnlaw.com				
			to be used for future annual report notifi	cation)		
For furth	er information co	oncerning this matter, please ca	all:			
Danielle	L. Vaughn		727 223-6080			
Name of Person		f Person	at () Area Code Daytime	Telephone Number		
Enclosed	l is a check for th	ne following amount:				
<b>≅</b> \$25.	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section			Street Address: Registration Sec	tion		

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

TO:

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

23007/18 AND 00 3 GIRL PROPERTIES LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on July 19, 2016 and assigned Florida document number L16000135922 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 "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 new registered agent and/or the new registered office address here: Name of New Registered Agent: 350 Corey Avenue New Registered Office Address: Enter Florida street address St. Pete Beach . Florida <u>33706</u>

## 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.

City

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
			□Add
			□Remove
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			□Remove
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). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effo Note:	ve date, if other than the date of filing:
f the record	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated <u>.</u>	Signature of a member or authorized representative of a member
	Denricha lugh Authorized representativo