L16100189402

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SECRETARY OF STATE

D. ERUCE WW 02 2016

COVER LETTER

TO: Registration Sec Division of Corp			
Australasia SUBJECT:	Holdings 4, LLC		
	Name of Lim	ited Liability Company	
	Amendment and fee(s) are submedence concerning this matter	-	
	Timothy F. Majors		
		Name of Person	
		Firm/Company	
	2106 N. Orange Avenue, S	Suite 200	
		Address	
	Orlando, FL 32804		
	tmajors@majorsinvestments	City/State and Zip Code s.com	
		to be used for future annual report notificati	ion)
For further information co	ncerning this matter, please ca	all:	
Brandon J. Bornstein, Esc	4.	407 650-0003 at ()	
Name of	Person	Area Code Daytime Tel	lephone Numbers
Enclosed is a check for the	e following amount:		HASSET Food
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certif

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

Australasia Holdings 4, LLC			
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appear la Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability C Florida document number L16000189402	Company were filed on 10.	/13/2016	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company he	re:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the d	esignation "LLC" or the ab	previation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
		·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, enter	the name of the nev
Name of New Registered Agent:			
New Registered Office Address:		TAL	
	Enter Flor	ida street address	
Naw Pagistawad Agantla Signatura if ahanging Pagistawa	City	SEE SY	Zip Cade
New Registered Agent's Signature, if changing Registere		بن	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and a accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	complete performance of igent as provided for in C ed office address, I hereb	my duties, and Fa m fo hapter 605, F.S. Or, 1	imiliar with and if this document is

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
MGR	Timothy F. Majors	2106 North Orange Ave., Suite 200	
		Orlando, FL 32804	■ Remove
			Change
AMBR	Majors Property Holdings, LLC	2106 North Orange Ave., Suite 200	■ Add
		Orlando, FL 32804	□ Remove
			Change
			Remove
			☐ Change
			SE SO Add
			SEE F OR D Change
***************************************			☐ Remove
			□ Change
			Add
			☐ Remove
			Change

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Filing Fee: \$25.00