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Office Use Only



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SECRETARY OF STATE
JALLAHASSEE, FLORIDA

# **COVER LETTER**

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| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: / Source Property Solutions LLC Name of Limited Liability Company  |
| The enclosed Articles of Amendment and fee(s) are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:   |
| Terry Haylock Name of Person  1 source Property Solutions LLC Firm/Company  |
|   |
| 9951 Feathers Cart  |
| City/State and Zip Code  Tery Qone Source Jay, Com  E-mail address (to be used for future annual report notification)   |
| E-mail address! (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| Name of Person   at (90%) 300-736/ Area Code Daytime Telephone Number   |
| Enclosed is a check for the following amount:   |
| \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$ |
|   |

### 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

| Source II Coperty Compar<br>(Name of the Limited Limited Limited Limited L  | So / Hors L L C<br>ny as it now appears on our records.)<br>liability Company) | <del></del>   |
|---|--|---|
| The Articles of Organization for this Limited Liability Company Florida document number <u>L 16000205705</u>            | were filed on  | and assigned  |
| This amendment is submitted to amend the following:   |  |   |
| A. If amending name, enter the new name of the limited liabi  | lity company here:   |   |
| The new name must be distinguishable and contain the words "Limited Liabili   | ity Company," the designation "LLC" or   | r the abbreviation "L.L.C."   |
| Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)                |  | I SELF  |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)                                   |  | FILED<br>EP 25 P 8  |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here |  | and assigned  re:  Signation "LLC" or the abbreviation "L.L.C."  SEP 25  Our records, enter the name of the new |
| Name of New Registered Agent:   |  |   |
| New Registered Office Address:  | Enter Florida street address   |   |
|   | City , Florid  | da<br>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, enter the title, name, and address of each person being added or removed from our records:

1.

| MGR = Ma<br>AMBR = Au | nager<br>thorized Member |                          |                |
|-----------------------|--------------------------|--------------------------|----------------|
| Title                 | Name                     | Address                  | Type of Action |
| MGR                   | Manica Hancock           | 9951 Feathers court      | 🗆 Add          |
|                       |                          | Jacksonville FL<br>32246 | Remove         |
|                       |                          | <i>/ { U</i>             | Change         |
| 162                   | James Ned Beaty          | 10832 Cheathan trail     | Add            |
|                       |                          | Jacksonville Fc 32223    |                |
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| e: If the date inserted in                   | an the date of filing:  ate must be specific and cannot be prior to date this block does not meet the applicable s the Department of State's records. | (optional) e of filing or more than 90 days after filing.) Pursu tatutory filing requirements, this date will n | uant to 605.0<br>not be listed |
| ecord specifies a de<br>ne 90th day after th |   | effective time, at 12:01 a.m. on th   | ne earlie                      |
|  | ./ /7   |   |                                |
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| d <u>9//</u>                                 |   | `   |                                |

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Filing Fee: \$25.00