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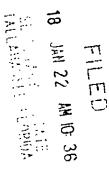
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COVER LETTER

Div	ision of Corp	porations		
SUBJECT:	East Pass Pr	ime Properties, LLC		
SUBJECT,		Name of Limi	ted Liability Company	
The enclosed	1 Articles of z	Amendment and fee(s) are sub-	nitted for filing.	
Please return	all correspor	ndence concerning this matter t	to the following:	
		Mark S. Embree (504)585-	0247	
			Name of Person	
		Adams and Reese LLP		
		701 Poydras Street, Suite 4	500	
			Address	
		New Orleans, Louisiana 70	1139	
			City/State and Zip Code	
		mark.embree@arlaw.com		
		E-mail address: (t	o be used for future annual report notifi	cation)
For further in	nformation co	oncerning this matter, please ca	dl:	
Mark S. Em	bree		504 585-0247	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
\$25,00	filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

 ${\bf MAILING~ADDRESS:}$

TO:

Registration Section

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

East Pass Prime Properties, LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compared and Compared the Compared Compared to the Compared Compa	and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	bility 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 registered agent and/or the new registered office address h		LED 36 22 AN 10 36
Name of China Daniet and Amonto		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florid	
	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Dick J. Guidry	18389 East Main St.	
		Galliano, LA 70354	■ Remove
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tellective date is listed, the date must	ock does not me	annot be prior to et the applicat	ble statutory fi	r more than 90 day ling requirement	s aner ming.) is, this date v	will not be b	isted
rument's effective date on the D				·			
record specifies a delayer		te, but not	an effective	e time, at 12	:01 a.m. c	on the ear	rlier
he 90th day after the rec	ord is filed.						
		2017					
December 7	 •	2017	·				
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ted	2 1.						
led Thus	Bully Signature of a me						

Page 3 of 3

Filing Fee: \$25.00