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## **COVER LETTER**

10 10 cm.	orporations	TAL ESTATE LLC	
BRECT: 7 2	Name of Li	TAL ESTATE LLC mited Liability Company	-
e enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
ase return all corresp	ondence concerning this matte	er to the following:	
	FREDER	ICK N. MATTHEW	US.
		Name of Person	
		Firm/Company	
	100100 OV	HRSEAS Huy UN	IT 371595
	KEY LA	PRGO FL 3303 City/State and Zip Code	7
		City/State and Zip Code	o.'/ .
	E-mail address:	loridaleys a gm (to be used for futyre annual report noti	fication)
further information	concerning this matter, please	cail:	
	N MATTHEWS	305 807 -	-4858
			100
	of Person	at ( <u>305</u> ) <u>807</u> - Area Code Daytim	e Telephone Number
PEDERICK Name	of Person the following amount:	Area Code Daytim	e Telephone Number

MAILING ADDRESS:

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

## STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 266! Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FIVING FICH DEAL ESTATE ILC

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on or Liability Company)	r records.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000001318</u> .	y were filed on $1/6$	3 2017 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
FLYING FISH DEVELOPY The new name must be distinguishable and contain the words "Limited Liab	MENT LLC	
the new name must be distinguishable and contain the words "Limited Liab	ility Company," the designati	on "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		. 23
		7 7
		3 7
Enter new mailing address, if applicable:	<del></del>	
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
If amending the registered agent and/or registered of gistered agent and/or the new registered office address her	office address on our - re:	records, enter the name of the new
	<u> </u>	
Name of New Registered Agent:		
Nam Danis and 7000 - 3 Harris		
New Registered Office Address:	Enter Florida stre	et address
		March .
	City	Florida
Registered Agent's Signature, if changing Registered Agent:	<u>:</u>	

by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is iled to merely reflect a change in the registered office address. I hereby confirm that the limited liability w has been notified in writing of this change.

If Changing Registered Agent. Signature of New Registered Agent

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	Name	<u>Address</u>	Type of Action
			☐ Change
			🗖 Add
			☐ Remove
			☐ Change
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