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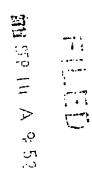
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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

subject: <u>Ebe</u>	rt's Property Name of Lim	Group LLC ited Liability Company		
	Amendment and fee(s) are sub ondence concerning this matter	-		
	Jos	eph Ebert Name of Person		
	Eberts	Firm/Company	LC	
		8 Ave w #51 Address	1	149 149 149 149
	Palmetto	FL 34221 City/State and Zip Code	······································	\$
Teber + 1844 @ gmail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:				> 9 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Joseph Name o	Ebert of Person	at (<u>941</u>) <u>432</u> - Area Code Daytime	1487 Telephone Number	
Enclosed is a check for the	he fołlowing amount:			
算 \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Certificate o Certified Co (additional cop)	of Status &
Registi Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURING Registration Section Division of Corpora Clifton Building	n	

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eberts Property		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company	were filed on <u>01 - 03 - 2</u> -0	217 and assigned
Florida document number 81-4832310.		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	lity company here:	
Toseph Ebert LLC The new name must be distinguishable and contain the words "Limited Liabil		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or t	he 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:	Bradenten FL	/ APT 331
Mailing address MAY BE A POST OFFICE BOX)	Bradenton FL	34205
		
 If amending the registered agent and/or registered of registered agent and/or the new registered office address here 		iter the name of the nev
Name of CNI and Decision of Access	·	=
Name of New Registered Agent:		
		٠
New Registered Office Address:		
New Registered Office Address:	Enter Florida street address	AM
New Registered Office Address:	Enter Florida street address , Florida	57

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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		 	Remove
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ective date, if other than the effective date is listed, the date muster. If the date inserted in this blument's effective date on the D	st be specific and clock does not me	cannot be prior to eet the applica		r more than 90 days			
record specifies a delayed he 90th day after the rec		ate, but not	an effectiv	e time, at 12:	01 a.m. or	n the ea	arlier
ed 09-11-20	118		_·	1			
	1/2/1	// /	(IX				
	Signature of a m	ember or author	rized representat	ive of a member			_

Page 3 of 3

Filing Fee: \$25.00