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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJEC		ida Investsments 2, LLC		
SOBJEC				
The encl	osed Articles of	Amendment and fee(s) are subt	nitted for filing.	
Please re	turn all correspo	ndence concerning this matter t	to the following:	
		Matthew Ladyman		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		Nishad Khan, PL		
			Firm/Company	
		617 E. Colonial Dr.		
			Address	
		Orlando, FL 32803		
			City/State and Zip Code	
		matthew@nishadkhanlaw.co	om to be used for future annual report notifi	cation)
For furth	ner information c	oncerning this matter, please co		
Matthey	w Ladyman		407 228-9711 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne 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)

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

B & K Florida Investments 2, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our records Limited Liability Company)	<u>.</u>)
The Articles of Organization for this Limited Liability C	Company were filed on 1/31/2017	and assigned
Florida document number L17000024795	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our record:	
registered agent and/or the new registered office and	ress here.	 €5
N. CN. B. Gradama		64
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	
	nnter rioriau street daures	.)
	, Fl	orida
	City	cap com

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>	Address	Type of Action
MGR	Haseeba Khan	901 Armstrong Blvd. Kissimmee, I	Add
			Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			□ Add ·
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			□ Remove
			☐ Change

5. 5. 6.	fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filing or mate: If the date inserted in this block does not meet the applicable statutory filin cument's effective date on the Department of State's records.	(optional) fore than 90 days after filing.) Pursuant to 605.0207 g requirements, this date will not be listed as

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Filing Fee: \$25.00