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| (Re | equestor's Name) | |
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| (Ĉi | ty/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | e) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO; | Registration Se Division of Cor | | | |
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| STID III | SR44NSB | | | |
| SUBJE | X.1: | | ited Liability Company | - |
| The end | closed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please | return all correspo | ondence concerning this matter | to the following: | |
| | | Larry R. Stout | | |
| | | | Name of Person | |
| | | Smith, Stout, Bigman & B | rock, P.A. | |
| | | · · · · · · · · · · · · · · · · · · · | Firm/Company | |
| | | P.O. Box 15200 | | |
| | | | Address | |
| | | Daytona Beach, Florida 32 | 115-5200 | |
| | | novapropmgmt@gmail.com | City/State and Zip Code | |
| | | | to be used for future annual report notif | ication) |
| For furt | her information c | oncerning this matter, please co | dl: | |
| Larry F | R. Stout | | 386 254-6875 | |
| | Name o | f Person | at () Area Code Daytime | Telephone Number |
| Enclose | ed 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:

TO:

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 Tallabassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SR44NSB LLC | | |
|--|---|--------------------------------|
| (<u>Name of the Limited Lia</u> (A Fle | ibility Company as it now appears on our record orda Limited Liability Company) | <u>v.</u>) |
| the Articles of Organization for this Limited Liabilit | y Company were filed on February 1, 2017 | and assigned |
| lorida document number 1.17000025175 | · | |
| his amendment is submitted to amend the following | î. | |
| . If amending name, enter the new name of the | limited liability company here: | |
| Sova Property Management, LLC | | |
| he new name must be distinguishable and contain the words " | Limited Liability Company," the designation "LLC | " or the abbreviation "L.L.C." |
| Inter new principal offices address, if applicable: | | |
| Principal office address MUST BE A STREET AD | DDRESS) | |
| Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u> | | |
| | · · · · · · · · · · · · · · · · · · · | |
| 3. If amending the registered agent and/or registered agent and/or the new registered office a | | , enter the name of the |
| the new registered white a | iddress dere. | <u> </u> |
| Name of New Registered Agent: | | 77 |
| New Registered Office Address: | | |
| | Enter Florida street addres. | |
| | Fb | orida 🔼 🚾 |
| | City | Zip Code |
| New Registered Agent's Signature, if changing Regist | ered Agent: | 377 & |

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 |
|--------------|------------------|---------------------------------|----------------|
| MGR | Steven I. Unatin | 767 S. Nova Road, Ormond Beach | = Add |
| | | FL 32174 | □ Remove |
| | | | Change |
| AMBR | Jerome H. Unatin | 767 S. Nova Road, Ormond Beach, | ■ Add |
| | | FI. 32174 | |
| | | | Change |
| | | | |
| | | | Remove |
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| Effective date, if other than the date of filing: (optional) | | |
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00