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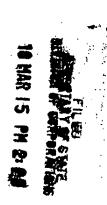
(Re	questor's Name)	
(Add	dress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	



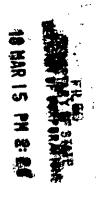


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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COLLABORATIVE PROJECT MANGE	in Henry Sobricts LLC
(Name of the Limited Liability Companion (A Florida Limited Li	y as it now annears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L14 occus 4.2213</u> .	were filed on 24 FERRIART 7017 and assigned
This amendment is submitted to amend the following:	
A. If amending same, enter the new name of the limited liabil	ky company here:
FLORION HOME WITH AV	iew LLC
The new name youst be distinguishable and contain the words "Limited Liability	by Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	30 FOURTH STREET S.U.
(Principal office address MUST BE A STREET ADDRESS)	WINTER HAVEN
'	FL33880.
Enter new molling address, if applicable:	30 FOURTH STREET S.W.
(Mailing address MAY BE A POST OFFICE BOX)	WINTER HAVEN
	FL33660
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent: JACOS	BURTON
New Registered Office Address: 30 F	Exter Florida street address
	77044

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

Zip Code

Page 1 of 3

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 = M AMBR = A	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MR.	CHRIS MACKIE	FLAT 7, 47 MAPERNI	<u>V</u> □ Add
· !		CNDON, NWZ 4HJ	Ren
·			Add See
			Change
Me	AMIN GET	STONE COTTAGE, FRACE	
		. SMCOT, CW28 9ET	ERemove
			☐ Change
MR	Thethy GAZUANI	2 COPELAND ROAD	
		WALTHAMSTON	Remove
(LONDON, EIT 9DB.	Change
		104 P	□ Add
			□ Remove
			Change
MRS	KATY BAINE	TOWERMILL COTTAGE,	DAdd
		WHITEHOUSE LANE, BLICHAM	P ☐ Remove
		COID 735.	☐ Change

CHANGUE COMPANY NAME:	
FROM: COLLABORATIVE PROJECT HAVALEMENT SERVICE	
10: FLORIDA HOME WITH A VIEW LLC,	
Removing 3 DIRECTORS:	
DAMIGN GENT, CHRISTOPHER MACKIE + TIM	OTTY CARLU
ADDING 1 DIRECTOR:	
KATY BAINE	
KATY + MATHEW BAWE TO BE 50/50	Smerku
	440111 37
ffective date, if other than the date of filing: FEBRUALY 18 208. (optional	1)
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filin store: If the date inserted in this block does not meet the applicable statutory filing requirements, this date	ig.) Pursuant to 605.
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Page 3 of 3

Filing Fee: \$25.00