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| (Re | equestor's Name) | |
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| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | ! |
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COVER LETTER

| | Registration Sec Division of Corp | | | | | | |
|-----------|--------------------------------------|---|---|---|--|--|--|
| erin ma | | SOUTHLAND COMMERCIAL GULF COAST, LLC | | | | | |
| SUBJEC | , 1 ; | Name of Limited Liability Company | | | | | |
| The enclo | osed Articles of a | Amendment and fee(s) are sub- | mitted for filing. | | | | |
| Please re | turn all correspon | idence concerning this matter | to the following: | | | | |
| | | Kevin L. Wattenbarger | | | | | |
| | | | Name of Person | | | | |
| | | Firm/Company | | | | | |
| | | 3108 W 23rd Street | | | | | |
| | | Address | | | | | |
| | | Panama City, FL 32405 | | | | | |
| | | City/State and Zip Code | | | | | |
| | | Kevin@WattenbargerManagement.com | | | | | |
| | | | to be used for future annual report no | lification) | | | |
| For furth | er information co | oncerning this matter, please co | all: | | | | |
| Kevin L | . Wattenbarger | | 850 913-9133 | | | | |
| | Name of | Person | at () Area Code Daytii | ne Telephone Number | | | |
| Enclosed | l is a check for the | e following amount: | | | | | |
| \$25.0 | 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



July 11, 2018

KEVIN L WATTENBARGER 3108 W 23RD ST PANAMA CITY, FL 32405 US

SUBJECT: SOUTHLAND COMMERCIAL | GULF COAST, LLC

Ref. Number: L17000059554

We have received your document for SOUTHLAND COMMERCIAL | GULF COAST, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 618A00014204

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| SOUTHLAND COMMERCIAL GULF COAST, LL | C | | | |
|--|---|--|--|--|
| (<u>Name of the Limited Liability Compa</u> (A Florida Limited l | ny as it now appears on our records.) .iability Company) | . | | |
| The Articles of Organization for this Limited Liability Company | were filed on 3/15/2017 | and assigned | | |
| Florida document number L17000059554 | | | | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, <u>enter the new name of the limited liab</u> | ility company here: | | | |
| Five Bridges Real Estate Services Company, LLC | | | | |
| he new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or the abb | reviation "L.L.C," | | |
| Enter new principal offices address, if applicable: | 3108 W 23rd Street | | | |
| Principal office address MUST BE A STREET ADDRESS) | Panama City, FL 32405 | | | |
| | | | | |
| Enter new mailing address, if applicable: | 3108 W 23rd Street | | | |
| Mailing address MAY BE A POST OFFICE BOX) | Panama City, FL 32405 | | | |
| | | | | |
| 3. If amending the registered agent and/or registered of registered agent and/or the new registered office address her | ffice address on our records, <u>enter t</u> <u>e</u> : | in name of the | | |
| | | 3 | | |
| Name of New Registered Agent: | | ენი და - ეგენი - ლადა | | |
| New Registered Office Address: | | The B | | |
| | Enter Florida street address | 9: 5 8: 5 | | |
| | Florida | 20.73.d. | | |
| | City | Zip Code | | |

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 _□ Add _□ Remove _□ Change _□ Add _□ Remove _ Change _🗀 Add □ Remove _ Ghange ☐ Refilove ☐ Change □ Add □ Remove _□ Change □ Add ☐ Remove _□ Change

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| fan ei Note: | tive date, if other than the date of filing: |
| ne re The | cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of 90 th day after the record is filed. |
| Dated | August 2 2018. |
| | Kewing (S. Member) |
| | Signature of a member or authorized representative of a member |

Page 3 of 3

Filing Fee: \$25.00