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COVER LETTER

| | Registration Sec Division of Corp | | | | | | |
|--|--------------------------------------|---|---|--|--|--|--|
| oup incr | Nolan Real Estate, LLC | | | | | | |
| SUBJECT: Name of Limited Liability Company | | | | | | | |
| The enclo | sed Articles of A | Amendment and fee(s) are sub- | mitted for filing. | | | | |
| Please reti | urn all correspor | ndence concerning this matter | to the following: | | | | |
| • | | Amanda Phillips | | | | | |
| | | | Name of Person | | | | |
| | | | Firm/Company | | | | |
| | | 3225 McLeod Drive, Suite | : 100 | | | | |
| | | | Address | | | | |
| | | Las Vegas, Nevada 89121 | | | | | |
| | City/State and Zip Code | | | | | | |
| | | ra@andersonadvisors.com | | | | | |
| | | E-mail address: (| to be used for future annual report notif | ication) | | | |
| For furthe | r information co | oncerning this matter, please ca | all: | | | | |
| Amanda ! | - | | 800 706-4741 | | | | |
| | Name of | Person | at () | : Telephone Number | | | |
| Enclosed | is a check for th | e following amount: | | | | | |
| \$25.0 | 0 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

| ~/ | , / |
|-------------|---------|
| 2019 FEB 19 | CO |
| | PH 6:46 |
| <u>s.</u>) | - 46 |

Nolan Real Estate, LLC (Name of the Limited Liability Company as it now appears on our record-(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{03/23/2017}{1}$ Florida document number L17000067057 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 1326 Azteca Dr Enter new principal offices address, if applicable: Jacksonville, FL 32218 (Principal office address MUST BE A STREET ADDRESS) 1326 Azteca Dr Enter new mailing address, if applicable: Jacksonville, FL 32218 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | Name | Address | Type of Action |
|--------------|--------------------------|-------------------------|----------------|
| MGR | Michael Fearheiley | 1326 Azteca Dr | |
| | | Jacksonville, FL 32218 | ☐ Remove |
| | | | ☐ Change |
| MGR | Daisy Fearheiley | 1326 Azteca Dr | ■ Add |
| | | Jacksonville, FL 32218 | Remove |
| | | | ☐ Change |
| AMBR | Red Door Properties, LLC | 1718 Capitol Avenue | |
| | | Cheyenne, Wyoming 82001 | Remove |
| | | | Change |
| | - | | Add |
| | | | □ Remove |
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| f an effective date is listed, the Note: If the date inserted i | an the date of filing: date must be specific and cannot be prior to date this block does not meet the applicable st the Department of State's records. | (optional) of filing or more than 90 days after filing.) Pursuant to 605.02 tatutory filing requirements, this date will not be listed a |
| ne record specifies a c The 90th day after t | | effective time, at 12:01 a.m. on the earlier |
| Dated | Quanda Ph | |
| | | 11. |

Page 3 of 3

Filing Fee: \$25.00