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COVER LETTER

TO;						
478188 8834		IR PROPERTIES, LLC				
SUBJEC	UI:	Name of Limited Liability Company				
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
	return all correspondence concerning this matter to the following: Megan Mosher					
		Lake Weir Properties, LLC				
		· · · · · · · · · · · · · · · · · · ·				
		The Villages, Fl. 32162	Address			
		City/State and Zip Code mmosher1069@gmail.com				
		E-mail address: (to be used for future annual report not	ification)		
For furth	er information c	oncerning this matter, please ca	all:			
Megan N			at (
	Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed	l is a check for th	ne following amount:				
\$25,0	00 Filing Fee		Certified Copy	Certificate of Status &		

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LAKE WEIR PROPERTIES, LLC

(Name of the Lim	ted Liability Compa (A Florida Limited)	any as it now appears (Liability Company)	on our records.)		
The Articles of Organization for this Limited I Florida document number	iability Company	were filed on April	24, 2017	qund a gree	ed
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 limited liability Company, the limited liability Company (limited liability Company), the limited liability Company (limited liability Company (limited liability Company (limited liabili			-	19 PM 5	
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the desi	ignation "LLC" or the at		· ·
Enter new principal offices address, if appli	1950 Laurel Mane	or Drive, Suite 130	{ ' ' I		
(Principal office address MUST BE A STREE	The Vitlages, FL 32162				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	1950 Laurel Mano The Villages, FL 3	or Drive, Suite 130		
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	/or registered of ffice address here Jeffrey P. Skate	<u>e</u> :	our records, <u>enter</u>	the name of t	he new
New Registered Office Address:	1028 Lake Sum	nter Landing			
New Kegistered Office Address:		Enter Florida	i street address	_	
	The Villages		. Florida ³²	162	
		City	ignation "LLC" or the abbreviation "L.N." or Drive, Suite 130 22162 our records, enter the name of the ne		

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>	<u>Name</u> Cheri Kleiser	Address 33836 Overton Drive	Type of Action
Mgr		The Villages, Fl. 32162	
			■ Remove
	Tanya Eason	1950 Laurel Manor Dr, Suite 130	Change
VP	·	The Villages, FL 32162	Add
		-	Remove
	Meg Mosher	1950 Laurel Manor Dr, Suite 130	Change
VP		The Villages, FL 32162	Add
			Remove
			Change
			Remove
			Change
		 	Add
			□ Remove
			Change
			Add
			🗆 Remove
			□ Change

D. If amendin	g any other information	, enter change(s) h	ere: (Attach addit	ional sheets, if necessa	ry.)	
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			· .			
			<u>-</u>			
		· · · · · · · · · · · · · · · · · · ·				
Note: If the document's the record	ate, if other than the date date is listed, the date must be date inserted in this block effective date on the Department of the Department of the day after the record	does not meet the app timent of State's recor fective date, but	olicable statutory fili rds.	ng requirements. this dat	e will not be liste	d as the
Octol Dated	per 12	2018				
-	Here's B	. Molse nature of a member or a	uthorized representativ	ve of a member	2018 OCT 19	
_	Rence B. Morse, Trustee (A		rinted name of signee		ASSE: 7	m
		. yped or pr	www. or signed		5: 2 E. FL	
		Pa	age 3 of 3		rei -	

Filing Fee: \$25.00