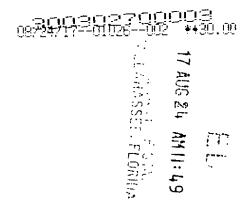
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## COVER LETTER

TO:	Registration Se Division of Cor			
ento n		RNATIONAL PROPERTY LL	.C	
SUBJI	cc:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		REGINE MERCIER		
		·	Name of Person	
		CHS INTERNATIONAL	PROPERTY LLC	
		-	Firm/Company	<del></del> -
		3671 ENVIRON BLVD #5	566	
			Address	
		LAUDEERHILL, FL 3331	9	
			City/State and Zip Code	
		CHSINTERNATIONALPR		
		E-mail address: (	to be used for future annual report notif	fication)
For fur	ther information co	oncerning this matter, please ca	all:	
REGI	NE MERCIER		305 781-5580	
	Name o	f Person	at ()	e Telephone Number
Enclos	ed is a check for th	ne following amount:		
□ \$2	5.00 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

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

### CHS INTERNATIONAL PROPERTY LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on MAY 8, 2017 and assigned Florida document number L17000101712 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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

Florida

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>	Name	Address	Type of Action
MGR	CHARLES FULLER	3671 ENVIRON BLVD #566	■ Add
		LAUDERHILL, FL 33319	□ Remove
			□ Change
AMBR	MICHELLE LAMARRE	3841 ENVIRON BLVD # 630	<b>=</b> Add
		LAUDERHILL, FL 33319	□ Remove
			Change
AMBR	BERNARD MERCIER	3841 ENVIRON BLVD #630	
		LAUDERHILL, FL 33319	□ Remove
			☐ Change
<del></del>			Add
			□ Remove
			Change
<del>-</del>			Adding Remove
			Change 90
			☐ Remove
			Change

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effective date is listed, the date must e: If the date inserted in this blo- ament's effective date on the Dep	oartment of State	t the applicable e's records.	statutory filing	re than 90 days; ; requirements,	after filing.) Purs this date will	not be li	sted as
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Filing Fee: \$25.00