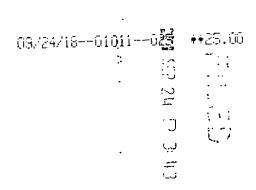


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COVER LETTER

10: Registration Se Division of Coa	rporations				
SUBJECT: KELL-POI	L PROPERTIES, LLC				
	Name of Lin	nited Liability Company		-	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Daniel Johnson				
		Name of Person		- .	
Kell-Pol Properties Firm/Company					脚型 SEP 2 U
		Firm/Company			មួ
	1401 Manatee Ave, W.: #	600		÷	
	·	Address			Ü
Bradenton, FL 34205					ري دا
		City/State and Zip Code		_	٠,
	dan.johnson@gowbs.com				
	E-mail address: (to be used for future annual report	notification)	•	
For further information c	concerning this matter, please c	all:			
Dan Johnson		941 746-656			
Name c	of Person	Area Code Da	vtime Telephone Numb	er	_
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	rate of S ed Copy	Status &
MAIL	ING ADDRESS:	STREET/COU	RIER ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Fallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KELL-POL PROPERTIES, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	unv as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company lorida document number <u>L17000107191</u> .	were filed on May 15, 2017	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	nility company here:	
		11 (2) 01 (2)
he new name must be distinguishable and contain the words "Limited Liabi	thity Company. The designation "LLC" or the	abbreviation "L.L.C.
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
	, !	24
nter new mailing address, if applicable:	; 	
Mailing address MAY BE A POST OFFICE BOX)		(_U 3 ₄ ,
. If amending the registered agent and/or registered o egistered agent and/or the new registered office address her		r the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Phodd.	
	, Florida _ ,	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
MGR	Ruth Anne Kelly	1401 Manatee Ave. W.: Suite 600 Bradenton, FL 34205	
			Remove
			☐ Change
			Add
			☐ Remove
			Change
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			Change
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Effective date, if	other than the dat listed, the date must be:	e of filing	:	to date of filin	a or more than t	(option	al)	renant la	n 685 020'
Note: If the date i	nserted in this block ve date on the Depar	does not m	eet the applic	able statutory					
	fies a delayed ef after the record		ate, but no	et an effect	ive time, a	t 12:01 a.r	n. on	the e	arlier o
September Dated	20		2018						
				<u> </u>					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00