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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053

Phone : (561)694-8107

Fax Number : (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GRACIE PROPERTIES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRACIE PROPERTIES, LLC

(Name of the Limited Liabil (A Florid	lity Company as it now appears on our r la Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability	Company were filed on 06/23/2017	and assigned
Florida document number L17000137229	•	
This amendment is submitted to amend the following:	 '	
A. If amending name, enter the new name of the lin	nited liability company here:	
Velvet Hammer Investments, LLC		
The new name must be distinguishable and contain the words "Lin	mited 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 ADD	RESS)	
	**************************************	- 4
		COZO HA GECRE- LL A.H.
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		SAR I
		me -
		770
B. If amending the registered agent and/or registere	ed office address on our records, g	nter the name of the new regist
agent and/or the new registered office address here:		A 7
N CN B is 14 and		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	- dd
	Enter Florida Sireet (IGAT ESS
	City .	_, Florida
	•	z.p cure
New Registered Agent's Signature, if changing Register		
I hereby accept the appointment as registered agen provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my duti agent as provided for in Chapter red office address, I hereby confit	es, and I am familiar with and 605, F.S. Or, if this document is
	If Changing Registered Agent, Signs	ture 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

Title	Name	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Add
·			□ Rеточе
			☐Change
			□Add
			□Remove
			□Remove

Effective date, if other than the date of filing: (Optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Dated May The Zozo Signature of paremeter or authorized representative of a member Hatthan Young	_	
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