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COVER LETTER

TO: Registration Section Division of Corporations	*-
3101 Irving Street LLC	1
SUBJECT: Name c	Limited Liability Company
The enclosed Articles of Amendment and fee(s) ar	
Please return all correspondence concerning this m	atter to the following:
David Hill	
	Name of Person
3101 Irving Street LL	.e.
	Firm/Company
1688 Floyd Street	
	Address
Sarasota, FL 34239-2	<u> </u>
1711	City/State and Zip Code
hilldm@gmail.com E-mail add	ress: (to be used for future annual report notification)
For further information concerning this matter, ple	
David Hill	240 393-0492 at ()
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
■ \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of State	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

3101 Irving Street LLC	
(Name of the Limited Li	ability Company as it now appears on our records.) orida Limited Liability Company)
(A Fi	orida Limited Clabinty Company)
The Articles of Organization for this Limited Liabili	ty Company were filed on July 12, 2017 and assigned
Florida document number 1.17000149798	,
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the	limited liability company here:
he new name must be distinguishable and contain the words	'Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable	
Principal office address MUST BE A STREET Al	ODRESS)
	<u> </u>
\	AND SO THE
	表示が当
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	mor <u>m</u>
	2 2 2 2 0
1	FLORIDA STATE
	Ç m v
 If amending the registered agent and/or r 	egistered office address on our records, enter the name of the no
egistered agent and/or the new registered office	address here:
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Address.	Enter Florida street address
li di	
	, Florida
	City Zip Code
Yew Registered Agent's Signature, if changing Regis	tered Agent:
	ant and garge to get in this canacity. I further garge to comply with the

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 amendin	g Authorized Person(s) authorized from our records:	ed to mana	ge, enter the title, name, and address o	feach person being added
MGR = N				
<u>Title</u>	<u>Name</u>		Address	Type of Action
MGR	David Hill	<u> </u>	1688 Floyd St. Sarasota, FL 34239	
				Remove
				□ Change
		 - 		D Add
				Remove
				Change
				Remove
	•	1 1 1		Change
				□ Remove
		<u> </u>	<u> </u>	Change
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D.	If amending any other information, e	nter change(s) here: (Attach additional sheets, if neces	sary.)	
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		<u> </u>	7 A	
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Е.	Effective date, if other than the date of the date of the date is listed, the date must be specified. If the date inserted in this block document's effective date on the Department.	cific and cannot be prior to date of filing or more than 90 days after first not meet the applicable statutory filing requirements, this	iling.) Pursuant to 605.020	07 (3)(b is the
If t (b)	he record specifies a delayed effec The 90th day after the record is	tive date, but not an effective time, at 12:01 a. filed.	m. on the earlier c	of:
	Dated 9/1/2017 Signature	re of a member or authorized representative of a member		
	David M. Hill			
		Typed or printed name of signee		
		Page 3 of 3		

Filing Fee: \$25.00