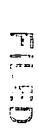
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(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:

Tallahassee, FL 32314

	Registration Sec Division of Cor					
eub we		E HOMES, LLC				
SUBJECT: Name of Limited Liability Company						
The enclo	sed Articles of .	Amendment and fee(s) are sub-	mitted for filing.			
Please ret	urn all correspo	ndence concerning this matter	to the following:			
		Leigh Stafford				
			Name of Person			
		Precise Planning				
		<u> </u>	Firm/Company			
		106 Elges Way				
			Address		,	2
		Sparks, NV 89431			·	2023 APR -3
			City/State and Zip Code			?? -
		leigh@preciseplanning.net				
		E-mail address: (to be used for future annual report no	dification)	10	<u> </u>
For furthe	r information c	oncerning this matter, please ca	all:		그를	PH 12: 59
Leigh Sta	affor d		775 848-6265		F.1	9
	Name o	l Person		me Telephone Number		
Enclosed	is a check for th	ne following amount:				
■ \$25. 0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 File Certificate Certified ((additional of	e of Statu. Copy	
	Mailing Addres		Street Address:	laction		
	Registration S Division of C		Registration S Division of Co			
	P.O. Box 632		The Centre of			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CITYGATE HOMES, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 11/01/2017	and assigned
Florida document number L17000226176		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3948 3rd St. South #334	202
Principal office address MUST BE A STREET ADDRESS)	Jacksonville Beach, FL 32250	33
		πο _{εσ.} 1 (πο
Enter new mailing address, if applicable:	3948 3rd St. South #334	PH PH PH
Mailing address MAY BE A POST OFFICE BOX)	Jacksonville Beach, FL 32250) [2: 5
		רוז עס
B. If amending the registered agent and/or registered office and and/or the new registered office address here:	nddress on our records, enter the	name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	·
		la.
	, Floric	1a 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	Corinne S. Tesh	3948 3rd St. South #334	■Add
		Jacksonville Beach, FL 32250	Remove
			□Change
MGR	Synergy Property Investors, Inc.	5755 Peak Rd	
		Reno. NV 89510	■ Remove
			□Change
			D Add PR □ Remove
			P Change
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

E. Effective date, if other than the date of filing:	
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Date 1 - Early -	ve date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Counce Steph	Signature of a member or authorized representative of a member
Signature of a member or authorized representative of a member Corinne S. Tesh	

Filing Fee: \$25.00