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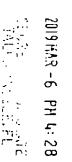
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R. WHITE MAR 1 3 2019

COVER LETTER

TO:	Registration Division of C	Section Corporations		
CLUD III		AND ISLAND REALTY LLC		
SUBJE	CT:	Name of Lim	nited Liability Company	
The enc	losed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all corre	spondence concerning this matter	to the following:	
		Sylvia Lusink		
			Name of Person	
		200 9th A M	Firm/Company	
		289 8th Ave N		
		Tierra Verde, FL 33715	Address	
		sytvialusink@hotmail.com	City/State and Zip Code	
		li-mail address: (to be used for future annual report not	ification)
For furt	her informatio	on concerning this matter, please c	all:	
Sylvia I	Lusink		727 470-3021	
	Nan	ne of Person	Area Code Daytir	ne Telephone Number
Enclose	d is a check fo	or the following amount:		
9 525	.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

2019 HAR - 6 PH 4: 28 BEACH AND ISLAND REALTY LLC (Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

[A Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 1/8/2018 and assigned Florida document number L18000006070 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Sylvia E Lusink Koomen, LLC 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

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
			
			☐ Remove
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tive date, if other than the lective date is listed, the date in lf the date inserted in this nent's effective date on the	ust be specific and cannot be p block does not meet the ap	orior to date of filing or plicable statutory fil	more than 90 days after ti	ling.) Pursuant to 605.0
cord specifies a delay 90th day after the re		not an effective	time, at 12:01 a.	m. on the earlier
March 1st	2019	·		
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Shusiak Au	Signature of a member or a			

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Filing Fee: \$25.00