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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	IIABLE REAL E Name of Lim	STATE PROPERTA	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	2819 1.P.
Please return all corresp	ondence concerning this matter	to the following:	Sort 1
	DANI	Name of Person	2019 IPR -1 P b: 23
		Firm/Company	
	925	BAYSIDE BLUFF Address	RD
	JACKSON DTAM E-mail address: (VILLE FLORIDA City/State and Zip Code JTON MAC, COW to be used for future annual report notif	32259 ()
For further information	concerning this matter, please co		
DANNY TA	PNTON of Person	at (904) 343 - Area Code Daytime	2642 Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 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

VIABLE REAL ESTATE PROPERTIES (Name of the Limited Liability Company as it now appears on our recognition (A Florida Limited Liability Company)	es, LLC
The Articles of Organization for this Limited Liability Company were filed on/18/2 Florida document number/80000 /6477.	1
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	2919
The new name must be distinguishable and contain the words "Limited Liability Company." the designation "I	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Gir i
(Principal office address MUST BE A STREET ADDRESS) ——————————————————————————————————	
Enter new mailing address, if applicable:	Self wi
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our reco registered agent and/or the new registered office address here:	rds, <u>enter the name of the ne</u>
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street ack	bess
	Florida
City	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
AMBR	CYNTHIA TANTON	925 BABIDE BLUFF RD JACKSONVILLE, FL. 32259	
			Remove
			Change
			
			Remove
		ALLAHAS	Change
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			O Add
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			Change
			C Remove
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			Remove
			Change

If amend	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	7	23
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If an effective Note: If t	e date, if other than the date of filing: 3/25/2019 (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be not's effective date on the Department of State's records.	to 605.0207 e listed as
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ϵ 00th day after the record is filed.	earlier of
Dated	3/25 2019	
	Signature of a member or authorized representative of a member	
	DANNY TANTON	
	Typed or printed name of signee	_

Page 3 of 3

Filing Fee: \$25.00