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ONTSIGN OF CORPORATIONS
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RICK CROCKER

CELL: 407-401-8289	
FAX: 866-735-9381	

rick@rickerocker.com

2457 ORSOTA CIRCLE OCOEE, FL 34761

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

June 10th, 2016

Re:

Easy Property Acquistions, LLC - Doc #L18000027252

To Whom It May Concern:

I must change the name of my new LLC from Easy Property Acquisitions, LLC to Crocker Property Acquisitions, LLC.

The address is 2457 Orsota Circle, Ocoee, FL 34761 and my daytime phone number is 407-401-8289. Please let me know if you need anything else regarding this.

I appreciate you help with this matter.

Sichard & Cracker

Best regards.

Richard B. Crocker

COVER LETTER

	; istration Se ision of Cor			
SUBJECT:				
songner.		Name of Lim	ited Liability Company	
The enclosed	l Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Richard B Crocker		
			Name of Person	
		Property Acquisitions. LLC Name of Limited Liability Company les of Amendment and fee(s) are submitted for filing, rrespondence concerning this matter to the following: Richard B Crocker Name of Person Crocker Property Acquisitions, LLC Firm/Company 2457 Orsota Circle Address Ococe, Fl. 34761 City/State and Zip Code rick@rickerocker.com E-mail address: (to be used for future annual report notification) attion concerning this matter, please call: Area Code Daytime Telephone Number		
			Name of Limited Liability Company ice(s) are submitted for filing. g this matter to the following: ocker Name of Person erty Acquisitions, LLC Firm/Company fircle Address 761 City/State and Zip Code icer.com nail address: (to be used for future annual report notification) iter. please call: at (107	
		2457 Orsota Circle		
			Address	· · · · · · · · · · · · · · · · · · ·
		Ococe, FL 34761	Address City/State and Zip Code Modress: (to be used for future annual report notification) lease call: at (1/Area Code) Area Code Daytime Telephone Number & \$55.00 Filing Fee & \$60.00 Filing Fee atus Certified Copy (additional copy is enclosed) Certified Copy (certified Copy (certified Copy (certified Copy) (certified Copy (certified Copy) (certified Copy) (certified Copy (certified Copy)	
			City/State and Zip Code	
			•	ication)
For further in	nformation co	oncerning this matter, please co	all:	
Richard B C	rocker			
	Name of	Person		: Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 F	iling Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

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

Easy Property Acquisitions, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 1/30/2018 Florida document number L18000027252 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Crocker Property Acquisitions, LLC The 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 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member			
<u>Title</u>	<u>Name</u>	Address	Type of Action
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in effective date is listed, the date must b	se specific and cannot be prior to date of filing or	(optional) more than 90 days after filing.) Pursuant	to 605.02
ofe: If the date inserted in this bloc cument's effective date on the Dep	k does not meet the applicable statutory fili artment of State's records.	ing requirements, this date will not b	e listed
record specifies a delayed	effective date, but not an effective	time, at 12:01 a.m. on the ϵ	earlier
The 90th day after the recor	a is filed.		
February 18th	2018		ca.
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Richard B Crocker	g	•	PM 3:

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Filing Fee: \$25.00