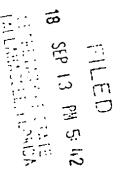
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Office Use Only



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COVER LETTER

Division of C	orporations		
Greentre	ee Partners, LLC		
	Name of Li	imited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	thmitted for filing	
	condence concerning this matte		
	Robert H. Burrow	- · · - 	
		Name of Person	
	10 Sabal Island Dr.	Firm/Company	
	Ocean Ridge, FL 33435	Address	
	rburrow778@aol.com	City/State and Zip Code	
For further information of	E-mail address:	(to be used for future annual report notifical):	fication)
Robert H. Burrow		954 275-6935 at ()	
Name o	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	5330.00 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)
\$# AVE	INC ADDRESS		

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

Greentree Partners, LLC		
(Name of the Li	mited Liability Company as it now app (A Florida Limited Liability Company	pears on our records.)
The Articles of Organization for this Limited Florida document number L18000027865		
This amendment is submitted to amend the fo	ollowing:	
A. If amending name, enter the new name	-	here:
The new name must be distinguishable and contain the	e words "Limited Lizbility Company," th	e designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if app		S 7
(Principal office address MUST BE A STRI		5 7
Enter new mailing address, if applicable:		20
(Mailing address MAY BE A POST OFFICE	E BOX)	
B. If amending the registered agent an registered agent and/or the new registered	d/or registered office address office address office address here:	on our records, enter the name of the ne
Name of New Registered Agent:	Robert H. Burrow	
New Registered Office Address:	10 Sabal Island Dr.	
	Enter Fl	orida street address
	Ocean Ridge	, Florida ³³⁴³⁵
	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.

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
			
			□ Remove
			Change
			Add
			CI Remove
			Change
			OnAdd Themove
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			5 Add
			Remove
			Change
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			□ Change

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ffective date, if other than the same effective date is listed, the date in lote: If the date inserted in this ocument's effective date on the	August 29, 2018 he date of filing: must be specific and cannot be prior to date of block does not meet the applicable star Department of State's records.	(optional) filling or more than 90 days after filling.) utory filling requirements, this date v	Pursuant to 605,020 vill not be listed a
e record specifies a delaye	ed effective date, but not an efecord is filed.	fective time, at 12:01 a.m. c	on the earlier o
e record specifies a delaye The 90th day after the re	ed effective date, but not an ef ecord is filed. 2018	fective time, at 12:01 a.m. c	on the earlier (
e record specifies a delaye The 90th day after the re ated August 29	score is meg.		on the earlier of

Page 3 of 3

Filing Fee: \$25.00