L18000102899

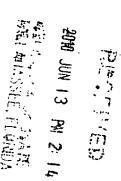
(Requestor's Name)
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k SALY JUN 1 4 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 240797 8186800

AUTHORIZATION : Oxy

COST LIMIT : \$ 25 00

ORDER DATE : June 4, 2018

ORDER TIME : 11:21 AM

ORDER NO. : 240797-010

CUSTOMER NO: 8186800

DOMESTIC AMENDMENT FILING

NAME: PASSION REALTY INVESTMENT

GROUP, LLC

EFFECTIVE DATE:

XXX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

18 JUN 13 AM 7:52

PASSION REALTY INVESTMENT GROUP, 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	04/24/2018	and assigned
Florida document number L18000102899			and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company	<u>here</u> :	
The new name must be distinguishable and contain the words "Lir	nited Liability Company," th	e designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	***************************************		
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:	ress nere:	on our records, <u>ent</u>	er the name of the new
New Registered Office Address:			
	Enter Fl	orida street address	
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered	J Agent:		Zip Code
hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and concept the obligations of my position as registered ago in the obligations of my position as registered ago in the registered peing filed to merely reflect a change in the registered ompany has been notified in writing of this change.	and agree to act in this complete performance of tent as provided for in	f my duties, and I an Change 605 F S 7	n familiar with and
	If Changing Registered A	gent, <u>Signature of New</u>)	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 = ManagerAMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Kimberly M. Graham	990 QUAYE LAKE CIRCLE, #101	⊠ Add
		WELLINGTON, FL 3341	□ Remove
			Change
			□ Remove
			Change
		·	Remove
			Di Add
			7 Semove 2
			🗆 Change
			□ Add
			🗆 Remové
			☐ Change
			
			D Remove
			Change

	
	3
	52
Note:	ive date, if other than the date of filing:
ie red The	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	
	The State of the s
	Signature of a member or authorized representative of a member
	1
	Ron Graham

Page 3 of 3

Filing Fee: \$25.00