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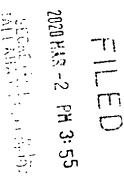
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COVER LETTER

	Registration Se Division of Cor			
SUBJEC		EEZE PROPERTIES, LLC		
SUBJEC.	· ·	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please ret	urn all correspo	ondence concerning this matter	to the following:	
		Patricia Sheridan		
			Name of Person	
			Firm/Company	.
		202 Sweet Gum Rd		
		Pittsburgh, PA 15238	Address	
		riusouigii, FA 15256		
		onepizoli314@gmail.com	City/State and Zip Code	
			to be used for future annual report notifies	ation)
For furthe	r information c	oncerning this matter, please c	all;	
Patricia S	heridan	,	412 600-8834	
	Name o	f Person	Area Code Daytime T	Telephone Number
Enclosed i	is a check for th	ne following amount:		
\$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
_	<u>Mailing Addres</u> Registration S		Street Address:	on
	Division of C		Registration Secti Division of Corpo	
	P.O. Box 632	-	The Centre of Tal	
T	Tallahassee, I	FL 32314	2415 N. Monroe S	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

POINT BREEZEPROPERTIES, LLC

	10	
ARTICLES OF	F ORGANIZATION	
	OF	
POINT BREEZEPROPERTIES, LLC	ments as it has appeared as an all a	~ (
(<u>Name of the Limited Liability Cor</u> (A Florida Limi	ted Liability Company)	and assigned 5
The Articles of Organization for this Limited Liability Compa	anu wara filad an 04/25/2018	بن مکان سائنده آسد
	any were med on	and assigned)
Florida document number L18000104209		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited l</u>	iability campany hora:	
v. It amending name, enter the new name of the minted i	nabinty company nerg.	
The new name must be distinguishable and contain the words "Limited 1,	inhility Company " the decignation	"H C" or the abbreviation "L L C"
·	sannay Company, the designation	The of the novievinion 1332.0.
Enter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET ADDRESS</u>	2	
Enter new mailing address, if applicable:	202 Sweet Gum Rd	
Mailing address MAY BE A POST OFFICE BOX)	Pittsburgh, PA 15238	
	- · · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered offi	ce address on our records, e	nter the name of the new register
ngent and/or the new registered office address here:		
Name of New Registered Agent:	-	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	Enter Florida street a	uddress
	City	Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:	
hereby accept the appointment as registered agent and c	coree to zet in this ezozacity	I further caree to comply with t
	igree to det in titis capacity.	
	lete performance of my dutie	28. and Lam familiar with and 🥏
provisions of all statutes relative to the proper and compl		
	as provided for in Chapter (605, F.S. Or, if this document is

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 AMY M PIZOLI	1009 SOUTH ROAD	□Add	
	WAKEFIELD, RI 02879		
		□Change	
AMBR WILLIAM F PIZOLI JR.	1009 SOUTH ROAD	□Add	
	WAKEFIELD, RI 02879	■Remove	
			□Change
			□Add
			⊟Remove
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	06/01/2019
Effectiv	e date, if other than the date of filing: (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 to 605,0207 (3)
Note: 11	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
documei	nt's effective date on the Department of State's records.
the record ford is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
Dated F	ebniary 24 2020
	- I Sh UW
	Signature of a member or authorized representative of a member
	Patricia Sheridan
	Typed or printed name of signee

Filing Fee: \$25.00