Division of Corporations **Electronic Filing Cover Sheet**

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: (727)443-5190

Fax Number

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN. **BOWTIE REAL ESTATE, LLC**

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JUL 3 1 2018

To: 8506176383@relax con Fax: (850) 817-8383

H18000218595 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BOWTIE REAL ESTATE, LLC			
(Name of the Limited Liability Compar (A Florida Limited).	ny as it now appears on our records.) sability Company)		
he Articles of Organization for this Limited Liability Company	were filed on 06/15/2018		_ and assigned
Torida document number L18000150332			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" of	r the abore	viation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)			
İ			
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX			
			<u> </u>
B. If amending the registered agent and/or registered of	ffice address on our records,	enter th	ne name of the
registered agent and/or the new registered office address here	€ :	_	20.16
			5 5
Name of New Registered Agent:	***	<u> </u>	
			3C
New Registered Office Address:	Enter Florida street address	•	
	, Flor	ida= -	-
	City	***	Zip Code
New Registered Agent's Signature, if changing Registered Agent;		7	3
it is a special and a special		her nore	e to comply wit:

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

H180002185953

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

Title	Name	Address	Type of Action
AMBR	SAMS, AMY L	1410 GARDEN AVE	
		TARPON SPRINGS, FL 34689	Remove
			Change
AMBR	SAMS IV, MELVIN L	1410 GARDEN AVE	
	TARPON SPRINGS, FL 34689	Remove	
			Change
MGR SAMS, AMY I.	SAMS, AMY L	1410 GARDEN AVE	■ Add
		TARPON SPRINGS, FL 34689	Remove
			Change
MGR	SAMS IV, MELVIN L	1410 GARDEN AVE	Add
		TARPON SPRINGS, FL 34689	Remove
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an effective date is listed, the date mu	st be specific and cannot be prior	r to date of filing or more the	an 90 days after filing pirements, this date	μ) Pursuant to 6 e will not be li	505.02 isted
teres terbe dare imparted in this b	epartment of State's records	i.			
an effective date is listed, the date mularity and in this bookument's effective date on the E					
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late: If the date inserted in this be ocument's effective date on the Deciment is effective date on the Deciment in this because in the control of the contr	d effective date, but no	ot an effective time,	, at 12:01 a.m.	on the ear	
lote: If the date inserted in this b	d effective date, but no cord is filed.	ot an effective time,	, at 12:01 a.m.	on the ear	
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