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COVER LETTER

TO:

Registration Section **Division of Corporations**

Tallahassee, FL 32314

EPP PROP SUBJECT:	ERTIES LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	HAJIME SAGAWA		
		Name of Person	
		Firm/Company	
	540 Golden Harbour Drive	:	
	4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Address	
	Boca Raton, FL 33432		
	hajimesagawa@gmai.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report	notification)
For further information c	oncerning this matter, please c	all:	
Kathleen B. Johnson, Ese	q.	561 953-5280 at ())
Name o	f Person		rtime Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 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)
Mailing Addres		Street Address	
Registration S Division of C		Registration Division of O	
P.O. Box 632	-		of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



EPP PROPERTIES 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 or	n June 28, 2018 and assigned
Florida document number L18000174667	·	
This amendment is submitted to amend the fo	llowing:	
A. If amending name, enter the new name	of the limited liability compan	<u>y here</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company,"	the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE		
B. If amending the registered agent and/or agent and/or the new registered office addr	ess here:	ur records, enter the name of the new register
Name of New Registered Agent:	HAJIME SAGAWA	
New Registered Office Address:	540 Golden Harbour Drive	
	Enter	- Florida street address
	Boca Raton	, Florida ³³⁴³²
	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.

If Changing Registered Agent Signature of New Registered Agent

If amonding 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
Manager	ELLEN M. SAGAWA	540 Golden Harbour Drive, Boca Raton, FL 33432	□Add
			=Remove
Member	PULTNIM SACANIA	·	□Change
	ELLEN M. SAGAWA	540 Golden Harbour Drive, Boca Raton, FL 33432	🗆 Add
			=Remove
Manger	HA HME CACANIA		□Change
	HAJIME SAGAWA	540 Golden Harbour Drive, Boca Raton, FL 33432	\BAdd
			□Remove
			□Change
			□Add
			□Remove
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			_ DChange

Iffective date, if other than the date of filing: 12/23/2019					
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HAJIME SAGAWA	НАЛ	ME SAGAWA			