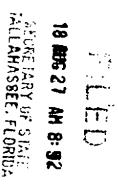
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COVER LETTER

	istration Secti ision of Corpo			•	
	This Girl Sells	s Real Estate Florida, LLC			•
SUBJECT:		Name of Limi	ited Liability Company		
		nendment and fee(s) are sub-			
		Christine Benton			
			Name of Person		
			Firm/Company		
		1511 Shelley Place			
		Lakeland, FL 33803	Address		18 2 L
		cbenton2232@gmail.com	City/State and Zip Co		ST. T.S.
For further in	nformation con-	E-mail address: (terning this matter, please ca	to be used for future and	nual report notificat	ion) Office 2
Christine Be		Ç .	863 at ()	640-7447	. ′
	Name of Po	erson	Area Code	Daytime Te	lephone Number
Enclosed is	a check for the	following amount:			
■ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing F Certified Copy (additional copy i	1	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

This Girl Sells Real Estate Florida, LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number 1.18000193733	y were filed on <u>04/04/2016</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
Christine Benton, LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		22 S
Enter new mailing address, if applicable:		SA ST
(Mailing address MAY BE A POST OFFICE BOX)		E ON SE
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.		enter the name of the new
Name of New Registered Agent:	<u>.</u>	, , , , , , , , , , , , , , , , , , , ,
New Registered Office Address:	Enter Florida street address	
	, Flori	
	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 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
			Add
			□ Remove
			Change
			Remove
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Filing Fee: \$25.00