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SUBJECT:	C & V Wood	lands Estates, LLC						
		mendment and fee(s) are sub	_					
r rease return	an correspond	Summer L. McLaughlin	to the following.					
		Grunder & Petteway, P.A.	Name of Person					
		23349 NW CR 236, Ste 10	Firm/Company					
		High Springs, FL 32643	Address					
		summermelaughlin@grund			_			
For further in	formation con	E-mail address: (i icerning this matter, please co	to be used for future and	ual report nouf	cation)		2018 HOV 2	
Summer L. M	1cLaughlin		386 at (454-1298 x 23		53.2	¥ 2	STATE OF THE PERSON NAMED IN
	Name of F	Person	Area Code	Daytime	Telephone Number			ا السائم الم
Enclosed is a	check for the	following amount:				<u> </u>	رخ 	
□ \$25.00 Fi	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing F Certified Copy tadditional copy t	y.	□ \$60.00 Filing Certificate o Certified Co (additional cop	of Status & py	• 7	

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

C & V Woodlands Estates, 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 $\frac{08/14/2018}{2018}$ and assigned Florida document number L18000194431 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Barefoot Life Beach Rental, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida City 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
MGR	Velma R. Cox	14683 NW SR 45	
		High Springs, FL 32643	D Add
		riigii springs, t t 32042	■ Remove
			Change
MGR	R. Velma Cox	11683 NW SR 45	
		High Springs, FL 32643	■ Add
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he 90th day after the record is filed.	Signature of prember or authorized representative of a member	
the 90th day after the record is filed.	Charles G. Cox J. and R. Velma Cox Typed or printed name of signer Velma R.	

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Filing Fee: \$25.00