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Special Instructions to Fili	ing Officer;	
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

hears for	- Living LLC	
Same of the Limited	Liability Company as it now appears on our re- A Florida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Lial	,	and assigned
This amendment is submitted to amend the follow	ving:	. ~3
A. If amending name, enter the new name of t	he limited liability company here:	E OCT
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "	'LLC" or the abbreviation "LLC."
Enter new principal offices address, if applical	ble:	3. B. D
(Principal office address MUST BE A STREET	ADDRESS)	75 <del>5</del>
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
B. If amending the registered agent and/or the new registered off		ords, enter the name of the new
Name of New Registered Agent:		<del></del>
New Registered Office Address:		
	Enter Florida street a	ddress
	City	_, Florida
	Sup	

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

Title Name Address Type of Action

MCT Sopnia Smith 203 Tangenne PKWY Defenove

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11 210	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Note docui	tive date, if other than the date of filing:	d as th
Dated	Wilhred Smul	
	Signature of a member or authorized representative of a member  (1) I FYCH SM H  Er S	Τ,
	Typed or printed name of signee	FILED
	Page 3 of 3	·

Filing Fee: \$25.00