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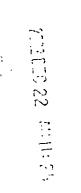
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COVER LETTER

TO: Registration Division of C			
SUBJECT: Florida li	nvestment Holding Group III LL	С	
		ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Harold Feener		
		Name of Person	
	Florida Investment Holdin	g Group III, LLC	
		Firm/Company	
	1400 Village Square Blvd	Ste 3-328	
		Address	•
	Tallahassee, FL 32312		
		City/State and Zip Code	
	michmckenzie@msn.com		
For further information	e-mail address: (a concerning this matter, please c	to be used for future annual report note all:	nication)
Michelle McKenzie		at (850) 251-6042 Area Code Daytin	
Name	e of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the 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 Addi Registration		<u>Street Address:</u> Registration Se	ection
	Corporations	Division of Co	
P.O. Box 6.	327	The Centre of T	Fallahassee
Tallahassee	, FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liabili</u> (A Florid:	ity Company as it now appears on our records. a Limited Liability Company))
The Articles of Organization for this Limited Liability C	and assigned	
Florida document number L18000280543		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
N/A		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC"	or the abbreviation "L.L.G."
Enter new principal offices address, if applicable:	<u>N/A</u>	
(Principal office address MUST BE A STREET ADDI	RESS)	<u> </u>
		2
Enter new mailing address, if applicable:	N/A	===
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter tl</u>	he name of the new regis
Name of New Registered Agent: N/A		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street address	
	, Flor	rida

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	Angela Feener	1400 Village Square Blvd Ste 3-328	
		Tallahassee, Fl. 32312	■Remove
			□Change
MGR	Sue Miller	1400 Village Square Blvd Ste 3-328	■Add
		Tallahassee, FL 32312	Remove
			Change OChange
			DAdd ==
			⊟Remove
			□ Change
			□Add
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cord specif s filed.	ics a delayed eff	ective date.	but not a	n effective	e time, at	12:01 a.m.	on the ca	rlier of: (t) The	90th day	/ after t
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Filing Fee: \$25.00