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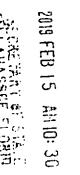
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## **COVER LETTER**

	egistration Section Section of Corp		•		
SUD HIZT		estment Properties of Orange C	County LLC		FEB
SUBJECT	· · · · · · · · · · · · · · · · · · ·	Name of Lim	ited Liability Company		1018 EB 15
The enclos	sed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please rett	ırn all correspo	ndence concerning this matter	to the following:		
		Lexie Rivers			
			Name of Person		
		Prime Corporate Services			
			Firm/Company		
		12226 S 1000 E Ste #3			
			Address		
		Draper, UT 84020			
	City/State and Zip Code				
		flinvprop@gmail.com			
			to be used for future annual re	port notification)	
For further	information co	oncerning this matter, please co	all:		
Lexie Riv	ers			4639	
	Name of	Person	at () Area Code	Daytime Telephone Number	
Enclosed i	s a check for th	e following amount:			
\$25.00	Filing Fee	☐ \$30.00 Fifing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	sed) Certified	e of Status &

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

` ARTICLES (	OF AMENDMENT	2
	TO	Oly
ARTICLES O	F ORGANIZATION	
	OF	
		A THE
	OPERTIES OF ORANGE COUNTY	LLC STATE OF THE S
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our recordited Liability Company)	LLC and acciound
The Articles of Organization for this Limited Liability Comp	pany were filed on 12/18/2018	and assigned
Florida document number 1.18000289870		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Florida Investment Properties of Central Florida LLC		
The new name must be distinguishable and contain the words "Limited"	Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u> </u>	<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<del> </del>
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		- <del></del>
	Enter Florida street addre.	SN
		lorida
	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
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			🗀 Remove
			☐ Change
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. at amending any other infor	mation, enter change(s) here: (Attach additional sheets, if necessary.)	
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<ul> <li>Note: If the date inserted in this</li> </ul>	the date of filing: (optional) must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60, s block does not meet the applicable statutory filing requirements, this date will not be list e Department of State's records.	95.0207 (3) ted as the
the record specifies a delay ) The 90th day after the r	yed effective date, but not an effective time, at 12:01 a.m. on the earli record is filed.	ier of:
Dated February 11	2019	
James	Signature of a member or authorized representative of a member	
James Paul Langford	V	

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Typed or printed name of signee

Filing Fee: \$25.00