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TO:

Registration Section **Division of Corporations**

TID IF CT.	PROSPIRE PROPERTIES, LLC		
SUBJECT:	Name of Limited Liability Company		
The enclosed Articles of Amendme	ent and fee(s) are submitted for filing.		
Please return all correspondence co	encerning this matter to the following:		
	Chase J Zortman Esq.		
	Name of Person		
	Zortman Law		
	Firm/Company		
	238 N Westmonte Drive Ste. 270		
	Address		
	Altamonte Springs, FL 32714		
	City/State and Zip Code	2023 SEC	
	CZortman@ZortmanLaw.com E-mail address: (to be used for future annual report notification)	2023 HOV 13 SECTIVE SECTIVE SECTIVE SECTIVE SECTIVE SECTIVE SECTION SE	
For further information concerning	this matter, please call:	∩ =1.	1
Chase J. Zortman E	sq. 407 863-1883	PH 2:	
Name of Person	Area Code Daytime 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 Address: Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

PROSPIRE PROPERTIES, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) 01/29/2019 The Articles of Organization for this Limited Liability Company were filed on _____ and assigned L19000029756 Florida document number ___ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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

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.

City

, Florida __

11 amending Authorized rerson(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
AMBR	OPUS PROPERTIES, LLC	1894 Oakbrook Drive	■Add
		Longwood, FL 32779	Remove
			[] Change
			□ Add
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			🗆 Change
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			12 Add
			C Remove
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			<u>C</u> Remove
			Change

Typed or printed name of signee

Grace Qi Li- Sunseed Ventures, LLC