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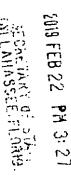
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Special Instructions to	Filing Officer:	
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COVER LETTER

10: Registration So Division of Cor	enorations		Silio con
SUBJECT:	AKE ME HO Name of Limi	ME PROPERTIE. ted Liability Company	2019 FEB 22 PM 3: 27 S LLC TALLAHASSIE, FLORID
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	LUDMILA H	Name of Person	
	TAKE ME T	COULC PROPERTIE	S, LLC
	114717200	7711 down de	-
	OdessA F	City/State and Zip Code	
	LH(E Ki'A E-mail address: (1	City/State and Zip Code Down L - CON to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca		
Lu DMI/A-	Hrewin Dr Person	at (<u>410</u>) <u>90_59</u> Area Code Daytine	e Telephone Number
Enclosed is a check for t	he 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TAKE ME HOME PROPERTIES, LLC
(Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on $\frac{2}{5/19}$ Florida document number <u>L</u> 190000 3 6 7 3 7 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 "L.L.C." 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

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 = A	authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Michel Barbeau	6731 Ranger dr	t Add
		6731 Ranger dr Tampa FL 33615	☐ Remove
			Change
MGR Myles Harvey	Myles Harvey	807 S. Howard Ave #1	10_hAdd
		807 S. Howard Ave #1	Remove
			Change
			Add
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	- The same of the
	Signature of a member or authorized representative of a member
	Lubmila Hiekin Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00