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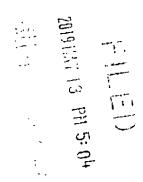
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: ABW REAL ESTATE SERVICET ULC Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Picase return all correspondence concerning this matter to the following:
ANDREW BRET WESLITER Name of Person
PROPERTIES OF THE VILLAGES
6815 TUSCAWICLA DRIVE Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ANDREW B WESCHER at 352 239-5407
Mea Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

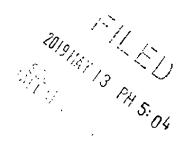
MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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



A.B.W. REAL ESTATE SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company Florida document number	were filed on MARIH 2 7019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, cnter the new name of the limited liability  ANDREW B WESCHER LC  The new name must be distinguishable and contain the words "Limited Liability".	
Enter new principal offices address, if applicable: N/A  (Principal office address MUST BE A STREET ADDRESS)	Stays THE SAME
Enter new mailing address (A applicable: A (Mailing address MAY BE A POST OFFICE BOX)	STAYS THE SAME
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter the name of the new
Name of New Registered Agent:	/4
New Registered Office Address:	Enter Florida street address  A , Florida N.A
Name Handadama I Assembly Clauses and Control of the Control of th	i one one

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	g Authorized Person(s) authoriz from our records:	eed to manage, <u>enter the title, name, a</u>	nd address of each person being adde
MGR = M $AMBR = A$	Ianager authorized Member	N/A	
Title	<u>Name</u>	Address	Type of Action
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<u> </u>	ve date, if other than the date of filing: Mry 9 M 20/9 (optional) ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.6 f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed not's effective date on the Department of State's records.
he rec The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.
	MAY 929, 2017.
Dated_	1 /2//

Page 3 of 3

Filing Fee: \$25.00