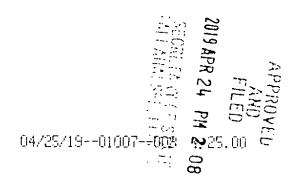
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COVER LETTER

TO:	Registration So Division of Cor				
SUBJEC	Lanier Prop	perties LLC			
SOBJEC		Name of Lim	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	unitted for filing		
		ondence concerning this matter	-		
		Thomas Lanier			
			Name of Person		FILE FILE
			Firm/Company		R 77
		6498 North Lagoon Drive	TimeCompany		LED 24 PM
			Address	<u> </u>	?
		Panama City, FL 32408		を も に に に に に に に に に に に に に	0 PM 2: 08
		tlanier21@outlook.com	City/State and Zip Code		
		E-mail address: (to be used for future annual report notifi	cation)	
For furth	er information of	concerning this matter, please c	all:		
Thomas	Lanier		760 975-4123		
	Name o	of Person		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	
	Regist	JNG ADDRESS:	STREET/COURIE Registration Section		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

DocuSign Envelope ID: 306D61E5-AA0E-44F7-B17F-793FAA7D230F ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Lanier Properties LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L19000093808	y were filed on April 10, 2019 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	bility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	2018			
(Principal office address MUST BE A STREET ADDRESS)	APR 24			
Enter new mailing address, if applicable:	P. 100			
(Mailing address MAY BE A POST OFFICE BOX)	- 1627 O			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her				
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	City Zip Code			
New Registered Agent's Signature, if changing Registered Agent:	<u>::</u>			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e p <mark>er</mark> formance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is			

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 306D61E5-AA0E-44F7-B17F-793FAA7D230F 11 amenuing Authorized Terson(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	Linda Morrissey-Lanier	6498 Lagoon Drive Panama City, FL 32408	= Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			Change
			Add Paremove
			PRemove AND
			2:
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. Effective da	ite, if other than the date	e of filing:		(optional)	
(If an effective of Note: If the	date is listed, the date must be s date inserted in this block of	pecific and cannot be prior to does not meet the applical		0 days after filing.) Pursua	
document s	effective date on the Depart	ment of State's records.			
	specifies a delayed eff n day after the record		an effective time, at	12:01 a.m. on the	e earlier of:
Dated	April 24	, 2019			
		Thomas Lanier			
_	Sign		zed representative of a mem	ber	
	Thoir	ias Lanier			
_		Typed or printed	name of signee	·	

Page 3 of 3

Filing Fee: \$25.00