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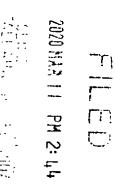
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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:	FRAND ONE Name of Lim	PROPERTY LLC ited Liability Company	- GRAND DNE PROPERTY L
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	SANDEE	P MANE /	PRITI PATEL
	2840 DOTL	Firm/Company	Teport notification) 569-1863 Daytime Telephone Number S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	2840 <u>D</u>	DYLE ROAD Address	
	DELTONA	/FL /32738	
		City/State and Zip Code	
-	E-mail address: (to be used for future annual report	notification)
For further information conc	erning this matter, please co	all:	
PRITI PAT	EL	at(386)56	9-1863
Name of Pe	rson	Area Code Da	ytime Telephone Number
Enclosed is a check for the f	ollowing amount:		
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Mailing Address: Registration Sec Division of Corp			Section
P.O. Box 6327	Mations		of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GRAND DNE PROPER		
(Name of the Limited Liability Compan (A Florida Limited Li	ny as it now appears on our records.) Liability Company)	~11
The Articles of Organization for this Limited Liability Company v	were filed on 05 06 2019 and assi	igned
Florida document number <u>L19000121549</u>	7	
This amendment is submitted to amend the following:) -
A. If amending name, enter the new name of the limited liabil	ility company here:	E
The new name must be distinguishable and contain the words "Limited Liabilit	ity Company," the designation "LLC" or the abbreviation "L.I	L.C."
Enter new principal offices address, if applicable:	2840 DOYLE ROAD	
(Principal office address MUST BE A STREET ADDRESS)	DELTONA, FL - 32738	
Enter new mailing address, if applicable:	866 ARBORMOOR PLACE	
(Mailing address MAY BE A POST OFFICE BOX)	LAKE MARY, FL 32746.	<u> </u>
B. If amending the registered agent and/or registered office adapted and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the name of the new</u>	<u>v registere</u>
New Registered Office Address:	Enter Florida street address	
	, Florida	
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p	ee to act in this capacity. I further agree to comp	

If Changing Registered Agent, Signature of New Registered Agent

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 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>	<u>Address</u>	Type of Action
MGR	SANDEEP MANE	2840 DOYLE ROAD	\D'Add
		DELTONA , FL - 32738	□Remove
		_	□Change
			□Add
			□Remove
			□Change
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