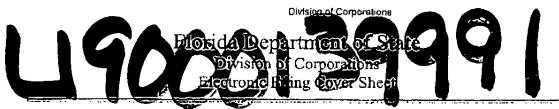
10/29/2019



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NATIONS BUSINESS CENTER, INC.

Account Number : I20000000238 Phone : (305)591-9448 Fax Number : (954)753-3447

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:		

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN WEDGE PROPERTIES, LLC.

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T. LEMIEUX

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION \*

WEDGE PROPERTI	•	
(Name of the Limited Liability Co (A Florida Lim	mpany as it now appears on our raited Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L19000139991</u>	eany were filed on 05/24/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
		异。 当
The new name must be distinguishable and contain the words "Limited I	lability 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	<u> </u>	- 第一名 FT
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		7070
Manual address 11.11 De 11 1 007 VI 1101 DONY		•
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		cords, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street a	ddress
		, Florida
	City	Zip Code

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 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

Title	Name	Address	Type of Action
AMBR	Elliott Matregrano	9321 Palm Tree Drive	
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		Windermere FL 34786	Ramove
			≅ Change
			□ Add
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Effective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this locument's effective date on the	ust be specific and cannot block does not meet the	be prior to date of filing applicable statutory	filing requirements, th	us date will not be listed as
e record specifies a delaye The 90th day after the re		ut not an effectiv	ve time, at 12:01	a.m. on the earlier of
October 28	2019			
X gm	75.00.000			
r Cymu	uregrano			
	Signature of a member	or authorized represents	tive of a member	