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| (Re | questor's Name) | |
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| (Cit | ty/State/Zip/Phone | <i>(#</i>) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| Division of Corp CAPSTON | porations E REALTY & ASSOCIATES L | LC | |
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| SUBJECT: | | | |
| | Name of Limi | ed Liability Company | |
| The enclosed Articles of . | Amendment and fee(s) are subr | nitted for filing. | |
| Please return all correspo | ndence concerning this matter t | o the following: | |
| | WEI-WEEN YANG VICTO | ORINO | |
| | | Name of Person | |
| | CAPSTONE REALTY & A | SSOCIATES, LLC | |
| | | Firm/Company | |
| | 1433 GULF TO BAY BLV | D STE E | |
| | | Address | |
| | CLEARWATER FL 33755 | | |
| | NIKKY@CAPSTONEREA | City/State and Zip Code LESTATE.US | |
| | E-mail address: (t | o be used for future annual report r | otification) |
| For further information c | oncerning this matter, please ca | | |
| WEI-WEEN YANG VIC | TORINO | 626 893-9955 | |
| Name o | f Person | at () Area Code Day | time Telephone Number |
| Enclosed is a check for the | ne 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 | | Street Address Registration | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section ...

TO:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | 2020 AUG 2 | 5 PH E. 02 |
|---|--|-------------------------------------|
| (Name of the Limited Liability Compar (A Florida Limited L | ny as it now appears on our re liability Company) | ecords.) OF UU |
| The Articles of Organization for this Limited Liability Company Florida document number | were filed on | and assigned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liabi | lity company here: | |
| The new name must be distinguishable and contain the words "Limited Liabil | ity 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 a agent and/or the new registered office address here: | ddress on our records, <u>e</u> | nter the name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | . <u> </u> |
| | Enter Florida street a | ddress |
| | | _, Florida |

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.

Cirv

Zip Code

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> | Address 2020 AUC OF DUTE OF | Type of Action |
|--------------|-----------------|-----------------------------|-----------------|
| MGR | DUSTIN ANDERSON | 2870 AHG 25 PH 5: 00 | |
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| ective date, if other than the da effective date is listed, the date must be e: If the date inserted in this block ument's effective date on the Depar | specific and cannot be prior to date of ti- does not meet the applicable statute | (optiona ling or more than 90 days after fili ory filing requirements, this da | ng.) Pursuant to 605.020 |
| cord specifies a delayed effective da s filed. | ite, but not an effective time, at 12:0 | I a.m. on the earlier of: (b) | The 90th day after the |
| JULY 31ST ed | 2020 | | |
| | ~ | 7 | |
| | nature of a member or authorized repre- | | |
| (1) | | | |