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COVER LETTER

Division of Corporations
SUBJECT: EQUITABLE PROPERTY ACQUISITIONS, L
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rufus Mithell Name of Person
Equitable Hoperty Acquisitions LLC
1750 Kelso Ave
Lake worth, FL 33460
Lack Worth, FL 35460 Remitchell 28 Egmail. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
For further information concerning this matter, please call:
Rufus Mitchell Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
N.
\$25.00 Filing Fee S25.00 Filing Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe

TO:

Registration Section

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, 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

EQUITABLE PROPERTY ACQUISITIONS, UC

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

(A Florida Limited Liability Company)

 $\sim 1-$

The Articles of Organization for this Limited Liability Company of	were filed on	and assigned	
Florida document numberL19000238589	•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company here:		
The new name must be distinguishable and contain the words "Limited Liability	ity Company," the designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	N/A		
Enter new mailing address, if applicable:			، دست
	111	70 TA	
(Mailing address MAY BE A POST OFFICE BOX)	N/A	198	
B. If amending the registered agent and/or registered off	fice address on our records, enter	the name of the ner	 W
registered agent and/or the new registered office address here		T 27	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
<u></u>	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

It 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>	Name	Address	Type of Action
MGR	Tina Mitchell		
			🗆 Remove
			Change
			🗆 Add
			Remove
			Change
			D Add
			Remove
			Change
			🖸 Add
			□ Remove
			Change
			Remove
			□ Change
			□ Add
			□ Remove
			🗆 Change

E. Effective date. If other than the date of filing: (If an effective 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 0217 (3) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated Date: Signifier of a member or antiborized representative of a member Ruffles Mathematical	·	
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Signature of a member or authorized representative of a member RIFUS HILLSHOP II	· ·	Bupus Mitchell
		Ruffus Mitchell

Page 3 of 3

Filing Fee: \$25.00