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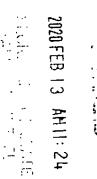
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## **COVER LETTER**

TO:

	Registration Se Division of Cor			
		00 LLC		
SUBJEC'	Г:	Name of Lim	ited Liability Company	<del>.</del>
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	arn all correspo	ondence concerning this matter	to the following:	
		NICHOLAS M. BRA		
			Name of Person	
		BRAUN LEGACY I	IOLDINGS LLC	
			Firm/Company	
8037 AMBACH WAY				
			Address	
		HYPOLUXO, FL 33	162	
			City/State and Zip Code	
		nbraun28@Gmai		
		E-mail address: (	to be used for future annual report no	tification)
For furthe	r information c	oncerning this matter, please ca	all:	
NICH	OLAS M. BRA	NUN	410 818-7649	
	Name o	f Person	at ()	me Telephone Number
Enclosed	is a check for th	ne following amount:		
<b>≡</b> \$25.0	0 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 Addres Registration S		Street Address: Registration S	ection
	Registration : Division of C		Division of Co	
ſ	P.O. Box 632	27	The Centre of	Tallahassee
	Γallahassee, l	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WP3300 LLC

(Name of the Limited L (A F	iability Compan lorida Limited Li	as it now appears on our records. ability Company)	)	
The Articles of Organization for this Limited Liabil	ity Company v	vere filed on DECEMBER 10, 2	019 and assigned	I
Florida document number L19000300931				
This amendment is submitted to amend the following	ıg:		2020 FEB 13	
A. If amending name, enter the new name of the	limited liabil	ty company here:		_
BRAUN LEGACY HOLDINGS LLC	•			·
The new name most be distinguishable and contain the words	"Limited Liabilit	y Company," the designation "LLC"	or the abbreviation "L.b.6."	1 1
Enter new principal offices address, if applicable	2:	8037 AMBACH WAY	7	
(Principal office address MUST BE A STREET A		HYPOLUNO, FL 33462	or the abbreviation "L. h.6."	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO)  B. If amending the registered agent and/or regis agent and/or the new registered office address he	stered office ac ere:		he name of the new reg	istered
Name of New Registered Agent:	NICHOLAS N	. BRAUN		
New Registered Office Address:	8037 AMBAC			
		Enter Florida street address		
	HYPOLUXO	, Flor	rida <u>33462</u>	
		City	Zip Code	
New Registered Agent's Signature, if changing Regi	stered Agent:			
I hereby accept the appointment as registered ay provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	ind complete pred agent as pristered office (	erformance of my duties, and ovided for in Chapter 605, F	l I am familiar with and S. Or, if this document	d

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	Type of Action
M	JOHN W BOYER	3300 PGA BLVD STE 625	□Add
		PALM BEACH GARDENS FL 33410	≣Remove
			□Change
М	NICHOLAS M BRAUN	8037 AMBACH WAY	<b>=</b> Add
		HYPOLUXO, FL 33462	2020 December 1
			□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
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·	
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 fil	(optional) ling or more than 90 days after filing.) Pursuant to 605.0207
Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as
he record specifies a delayed effective date, but not an effective time, at 12:0 ord is filed.	01 a.m. on the earlier of: (b) The 90th day after the
1 7	
27700	
Dated 7 (7026).	

Filing Fee: \$25.00

Typed or printed name of signee