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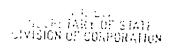
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## COVER LETTER

TO: Registration So Division of Co	ection rporations						
APN INV	ESTMENT PROPERTIES, LLC	a Florida limited liability company					
SUBJECT:	Name of Limite	d Liability Company					
The enclosed Articles o	Amendment and fee(s) are subm	nitted for filing.					
	ondence concerning this matter to						
	JULIE SHAW						
		Name of Person					
	JOHN E. AURELIUS, P.A.						
		Firm/Company					
	2787 E. OAKLAND PARK BLVD., SUITE 301						
		Address					
	FORT LAUDERDALE, FI	LORIDA					
		City/State and Zip Code					
	a_alberico@msn.com	to be used for future annual report notifi	cation)				
For further information	n concerning this matter, please c	an.					
JULIE SHAW		at ()	Telephone Number				
Nam	e of Person	at ()	Telephone Number				
	or the 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)				
P.O. Box (	on Section f Corporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810				

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 MAR -9 AM 11: 41

APN INVESTMENT PROPERTIES, LL (Name of the Limited Lin (A Fig.	C, a Florida lir ability Company orida Limited Li	nited liability company as it now appears on ability Company)	our records.)	
The Articles of Organization for this Limited Liabili Florida document number L20000053770				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:		
N/A  The new name must be distinguishable and contain the words	"Limited Liabili	ity Company," the desig	nation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	··	807 ARDMORE R	ACH, FLORIDA 3340	
(Principal office address 1495, 29, 29				
Enter new mailing address, if applicable:	3.7	807 ARDMORE F WEST PALM BE	ROAD ACH, FLORDA 3340	11
(Mailing address MAY BE A POST OFFICE BO	<u>A)</u> .			
B. If amending the registered agent and/or regi	stered office : <u>sere</u> :	address on our rec	ords, <u>enter the nan</u>	ne of the new registered
Name of New Registered Agent:				
New Registered Office Address:	807 ARDMOR		la street address	
	WEST PALM	веасн	, Florida <u>3</u>	3401
		City	<u> </u>	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.

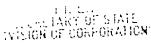
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

OVERAGE OF COSPORATION:

MGR = Manager AMBR = Authorized Member

### 21 MAR -9 AM [1:4]

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ANTHONY ALBERICO		□Add
			\_Remove
		807 ARDMORE ROAD, WEST PALM BEAR	CH, FL 33401 ———   Change
MGR	NICOL JENKINS		□Add
			□Remove
		807 ARDMORE RD, WEST PALM BEACH	, FL 3340 ↓ ■Change
MGR	PATRICIA BUSCH		□Add
	807 ARDMORE RD, WEST PA		□Remove
		807 ARDMORE RD, WEST PALM BEACE	I, FL 3340   ■Change
			□Add
			[]Remove
			Change
			□Remove
			Change
			🗆 Add
			Remove
			Change



	(VISION OF C	OREORATION.
mending any other information, enter change(s) here: (Attach addition	nal sheets, if pecasicary	AM 11: 41
MARCH 3, 2021	(optional)	(0.6.05
ARCH 3, 2021  MARCH 3, 2021  If an effective date is listed, the date must be specific and cannot be prior to date of filing or Note: If the date inserted in this block does not meet the applicable statutory fil document's effective date on the Department of State's records.	more than 90 days after filing, ing requirements, this date	Pursuant to 605.0. will not be listed
record specifies a delayed effective date, but not an effective time, at 12:01 a.m d is filed.	s. on the earlier of: (b) Th	e 90th day after t
MARCH 3, 2021		
Dated	ore of a member	
Signature of a member of authorized representati	ito of a monarci	
ANTHONY ALBERICO  Typed or printed name of signed		

Filing Fee: \$25.00