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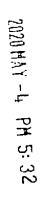
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Award

COVER LETTER

TO:	Registration So Division of Cor			
C110.1E4		Y ALLIANCE LLC		
SOBJE	CT:	Name of Lim	nited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		JACOB GREBETZ		
			Name of Person	
		- · · · · · · · · · · · · · · · · · · ·	Firm/Company	
		10850 111TH STREET N		
			Address	
		LARGO, FL 33778		
			City/State and Zip Code	
		grebetz317@me.com		
For furth	her information c	enail address: (to be used for future annual report all:	notification}
KURT	GLEESON		727 423-200:	5
	Name o	f Person		ytime Telephone Number
Enclosed	d is a check for th	he following amount:		
■ \$2 5	.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 Registration 5		Street Address Registration	
	Division of C		~	Corporations
	P.O. Box 632	7	The Centre of	of Tallahassee
	Tallahassee, I	FL 32314	2415 N. Mor	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PROPERTY ALLIANCE LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on February 28, 2020 and assigned Florida document number L20000066980 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 10850 111TH STREET N. LARGO, FL 33778 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here: Name of New Registered Agent: 10850 111TH STREET N. New Registered Office Address:

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.

City

LARGO

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida 33778

Zip Code

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	JACOB GREBETZ	10850 111TH STREET N. LARGO, FL 33778	□Add
			□Remove
			\\$Change
			□Add
			□Remove
			□ Change
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Effective date, if other than the da	to of filing				,	(optional)		
If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	specific and does not m	cannot be princet the app	plicable sta	of filing or mo tutory filing	re than 90 day:	s after filing.) Pursuant to 6	05.0207 isted as
e record specifies a delayed effective of rd is filed.	ate, but not	an effectiv	e time, at	12:01 a.m. o	n the earlier	of: (b) Th	ic 90th day a	fter the
Dated April 18		2020						
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~. A.	///		<)					
Si	gnature of a n	nember or a	athorized re	presentative o	of a member			
JACOB GREBETZ	_							

Filing Fee: \$25.00