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| Certified Copies | Certificate | s of Status |
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21 APR 19 PH 3: 50

| TO: Registra Division | | tion orations | | |
|--------------------------|------------|--|---|--|
| | ph A. D | ascoli Real Estate Holdings LL | C | |
| SUBJECT: | <u></u> | Name of Limit | ed Liability Company | |
| • | | | | |
| The enclosed Arti | icles of / | Amendment and fee(s) are subn | nitted for filing. | |
| Please return all c | correspor | ndence concerning this matter to | o the following: | |
| | | Joseph A. Dascoli | | |
| | | | Name of Person | p Code annual report notification) 510-0893 |
| _ | | | Firm/Company | |
| | | 86 Coriander Court | | |
| | | | Address | |
| | | East Amherst, New York 3 | 4051 | |
| | | jdasc002@fiu.edu | City/State and Zip Code | |
| | | | o be used for future annual report no | tification) |
| For further inform | nation co | oncerning this matter, please ca | dt: | |
| Joseph Dascioli | | | 716 510-0893 | |
| | Name of | Person | Area Code Dayti | me Telephone Number |
| Enclosed is a che | eck for th | ne following amount: | | |
| ■ \$25.00 Filin | g 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) |
| | 2 Addres | | Street Address: Registration S | Section |
| | | Section Forporations | Division of C | orporations |
| | Box 632 | 7 FL 32314 | The Centre of 2415 N. Mon | Tallahassee roe Street, Suite 810 |

Tallahassee, FL 32303

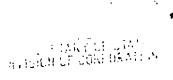
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COVER LETTER

Tallahassee, FL 32314

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



21 APR 19 PM 3:50

Jospeh A. Dascoli Real Estate Holdings LLC

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

(A Florida Limited Liability Company)

| he Articles of Organization for this Limited lorida document number L20000287506 | Liability Company | were filed on Septe | and assigned |
|---|----------------------|----------------------------------|--|
| his amendment is submitted to amend the fol | lowing: | | |
| . If amending name, enter the new name | of the limited liab | ility company hero | : |
| ne new name must be distinguishable and contain the | words "Limited Liabi | lity Company," the des | gnation "L.L.C" or the abbreviation "L.L.C." |
| nter new principal offices address, if applicable: | | 86 Coriander Court | |
| Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | East Amherst | |
| | | NY 14051 | |
| | | 86 Coriander Court East Amherst | |
| | | NY 14051 | - |
| If amending the registered agent and/or tent and/or the new registered office addr | | | ords, enter the name of the new regi |
| New Registered Office Address: | 922 NE 19th St | ı | |
| | | Enter Floride | a street address |
| | Cape Coral | | , Florida |
| | | City | Zip Code |
| | | | |

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.

SORA DUCK

If Changing Registered Agent, Signature of New Registered Agent

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11 amenuing Authorized rersonts) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

| | = Manager R = Authorized Member | | Constant Control (B. A. a. | |
|--------------|------------------------------------|---------------------------------|-----------------------------|--|
| <u>Title</u> | <u>Name</u> | Address 21 APR 19 | 9 위 3: 50 Type of Action | |
| MGR | 1031 Reverse Exchange Co LLC | 1520 Royal Palm Square Blvd 320 | □Add | |
| | | Ft Myers FL 33919 | ■Remove | |
| | | | □Change | |
| MGR | Joseph A. Dascoli | 86 Coriander Court | | |
| | | East Amherst NY 14051 | □ Remove | |
| | | | □ Change | |
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| fective date, if other than | the date of filing: | Selina a man than 00 do | (optional) | mant to 605 020 |
| in effective date is listed, the date | must be specific and cannot be prior to dat is block does not meet the applicable s | e of filing of more than 50 that statutory filing requirement | its, this date will | not be listed as |
| me: Ti the date inserted in thi | ie Department of State's records. | , | | |
| me: If the date inserted in this cument's effective date on the | • | | | |
| ote: If the date inserted in this secument's effective date on the | • | | | |
| ecument's effective date on the | ective date, but not an effective time, a | t 12:01 a.m. on the earlies | of: (b) The 90 | h day after the |
| ecument's effective date on the | | a 12:01 a.m. on the earlies | of: (b) The 90 | h day after the |
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| neument's effective date on th | ective date, but not an effective time, a | | of: (b) The 90 | h day after the |