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Tallahassee, FL 32314

TO:	Registration Sec Division of Corp			
		Garrett Real Estate Investors !	.I.C	
SU BJE	CCT:	Name of Limi	ted Liability Company	
The end	closed Articles of A	Amendment and fec(s) are sub-	mitted for filing.	
Plcase 1	return all correspo	ndence concerning this matter	to the following:	
		Priscilla	William S Name of Person	
		Williams &	Garrett Beal E	Estate Investors LC
		42 Service	Address	
		Saint Jo	5hns, FL 3aas City/State and Zip Code	59
		Priscilla QW E-mail addless: (1	illions @ omail (to be used for future anadal report notif	ication)
For fur	ther information o	oncerning this matter, please ca	all;	
	Priscille Name o	a Williams	at (708) 890 Area Code Daytime	- 6781 Telephone Number
Enclose	ed is a check for th	ne following amount:		
3 5 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 S Division of C	Section Corporations	Street Address: Registration Second Division of Cor	porations
	P.O. Box 632	. /	The Centre of T	ananassee

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Williams & Garrett Real Estate Investors LLC		
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on our record Liability Company)	rds.)
he Articles of Organization for this Limited Liability Companion lorida document number	y were filed on	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited lia	bility company here:	
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LL	.C" or the abbrevialen "L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		30
Enter new mailing address, if applicable:		: 22
Mailing address MAY BE A POST OFFICE BOX)		
 If amending the registered agent and/or registered office agent and/or the new registered office address here: 	e address on our records, <u>ente</u>	er the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
- -	Enter Florida street addr	ress
		Florida

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and scept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ring filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability mpany has been notified in writing of this change.

ur removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Curtis O.Williams	42 Servia Dr. Saint Johns, FL.	□
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an effective date is listed lote: If the date inser	d, the date must be specific a ted in this block does not	nd cannot be prior to date t meet the applicable st	of filing or more than 90 days a atutory filing requirements.	this date will not be listed a
ocument's effective d	late on the Department of	f State's records.		
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