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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations			
SUBJECT:	DeWaay Pro	operty Investments & Manager	nent, LLC		
SUBJECT:		Name of Limi	ted Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Adam H. Itzkowitz, Esq.			
			Name of Person		
		ltzkowitz Law, PLLC			
			Firm/Company		<u> </u>
		1034 Beicher Rd S			
			Address		
		Largo, FL 33771			
			City/State and Zip Code		
		adam@itzlawfirm.com			
		E-mail address: (to be used for future annual:	report notification)	
For further i	information c	oncerning this matter, please ca	all:		
Adam H. Ita	zkowitz		813 461 at ()	-6600	
	Name o	f Person	Area Code	Daytime Telepho	one Number
Enclosed is	a check for th	ne following amount:			
₩ \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enc		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres		<u>Street Ac</u> Registra	ddress: ation Section	
Di	ivision of C	Corporations		n of Corporation	
	O. Box 632		-	ntre of Tallaha . Monroe Stree	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

DeWaay Property Investments & Management, LLC

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(Name of the Limited Liability (A Florida I	Company as it now ap	ny) SECRETARY OF STATE		
(11) 101124		TALLAHASSEE, FL		
The Articles of Organization for this Limited Liability Co	mpany were filed on	and assigned		
Florida document number L22000102040	<u>.</u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company	<u>v here:</u>		
he new name must be distinguishable and contain the words "Limite	ed Liability Company," t	the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	37 25 42ND	3725 42ND AVE S		
Principal office address MUST BE A STREET ADDRE	St. Petersbu	St. Petersburg, FL 33711		
		· • · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable:	3725 42ND	3725 42ND AVE S		
Mailing address MAY BE A POST OFFICE BOX	St. Petersbur	rg, FL 33711		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on on	or records, <u>enter the name of the new reg</u>		
Name of New Registered Agent: Michael	Michael DeWaay			
New Registered Office Address: 3725 42	ND AVE S			
	Enter	Florida street address		
Si. Peter		, Florida 33711		
	City	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 Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

AMBR = Aut	horized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			🗆 Remove
			Change
			🗆 Add
			□Remove
			Change
			□Remove
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ffective date, if other than t an effective date is listed, the date in ote: If the date inserted in this ocument's effective date on the	nust be specific and cannot block does not meet the	be prior to date of filing applicable statutory	g or more than 90 days after f	iling.) Pursuant to 605.020
record specifies a delayed effect is filed.	tive date, but not an effe	ective time, at 12:01	a.m. on the earlier of: (b)	The 90th day after the
March 16	2022	<u> </u>		
	Min			
	Signature of a member	or authorized represer	tative of a member	

Filing Fee: \$25.00