| | (Requestor's Name) |
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| PICK-UI | P WAIT MAIL |
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| Certified Copies | Certificates of Status |
| Special Instructions | s to Filing Officer: |
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| | J. HORNE |
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CORPORATE ACCESS,

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

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| | | • | WALK IN |
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| | CERTIFIED COPY | | |
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| An Jara (Name of the Limited | Holdings Liability Company | 8) nvest | rents LG | |
|--|-------------------------------|--|----------------------|-----------------------|
| (λ | Florida Limited Lial | as it now appears on ou bility Company) | - Carrier | S = 1 |
| The Articles of Organization for this Limited Liab Florida document number | | ere filed on <u>(a/1</u> | 122 | rand assigned T |
| This amendment is submitted to amend the follow | ring: | | | 2. 59 8: 59 |
| A. If amending name, enter the new name of the | <u>ne limited liabilit</u> | y company here: | | |
| | | - | | |
| The new name must be distinguishable and contain the word | ls "Limited Liability | Company," the designation | on "LLC" or the abbr | eviation "L.L.C." |
| Enter new principal offices address, if applicab | le: _ | | | |
| (Principal office address MUST BE A STREET A | ADDRESS) | | | ···· |
| | _ | | | |
| | | | | |
| Enter new mailing address, if applicable: | _ | | · . | |
| (Mailing address MAY BE A POST OFFICE BO | <u>)X)</u> | | | |
| | _ | | | |
| B. If amending the registered agent and/or regi | istered office add nere: | iress on our records, | enter the name | of the new registered |
| Name of New Registered Agent: | | · · · · · · · · · · · · · · · · · · · | | |
| New Registered Office Address: | | | | |
| New Registered Office Address. | | Enter Florida stree | t address | |
| | | | Florid- | |
| - | | City | , Florida | Zip Code |
| New Registered Agent's Signature, if changing Reg | istered 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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | Name | <u>Address</u> | Type of Action |
|--------------|--------------|---------------------|----------------|
| UBR | Grace Ansara | 12345 NW 14 195T |) \$\dd |
| | | plantation FC 33372 | □Remove |
| | | | □Change |
| MBB | Caleb Ansara | 12345 Nw 14thSt | ∕Add |
| | | Plantation FC 333: | ZZ [Remove |
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| ifective date, if other than the date of filing: (optional) an effective date is listed, the date must be specific and counct be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 ate: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as becomen's effective date on the Department of State's records. Tecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the is filed. Ated Juy Signature of a member or authorized representative of a member | - | | | | | | | |
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| # + / · · · · · · · · · · · · · · · · · · | _ | | Signature of a | member or autho | rized representative of | of a member | <u> </u> | |

Filing Fee: \$25.00