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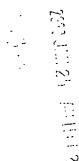
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PICK-UP	☐ WAIT	MAIL MAIL
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COVER LETTER

TO: Registration Section
Division of Corporations

PascoHillE SUBJECT:	Baer, LLC				
SUBJECT:	Name of Limi	ted Liability Company	<u> </u>		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspondent	ondence concerning this matter	to the following:			
	Steven Baer				
		Name of Person	<u>-</u>		
	Winkel Baer, Inc				
		Firm/Company		_	
	5050 Ocean Beach Blvd #1	08		~ ?	
		Address			
	Cocoa Beach, FL 32931				:
		City/State and Zip Code			-
	steve@chibaers.com			 	
	E-mail address: (to be used for future annual report notif	ication)	-	-
For further information	concerning this matter, please ca	all:			·J
Steven Baer		773 339-6969 at ()			
Name	of Person	Area Code Daytimu	e Telephone Numb	er	
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific	Filing Fee, cate of Status of ed Copy nal copy is enclose	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe	porations allahassee	810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PascoHillBaer, LLC	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) lability Company)
he Articles of Organization for this Limited Liability Company	were filed on and assigned
lorida document number 1.23000000346	
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liabi	lity company here:
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
•	~ · · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDRESS)	
	=======================================
Enter new mailing address, if applicable:	$\overline{\zeta}$
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the name of the new regi</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida Cin: Zip Code
	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 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Steven A. Baer	411 Carmine Drive	□Add
		Cocoa Beach, FL 32931	= Remove
			□Change
MGR Joy W. Baer	Joy W. Baer	411 Carmine Drive	
		Cocoa Beach, FL 32931	■ Remove
			□Change
			□Add
			□Remove
			□ Remove □ □ Change
			□ Add
			□ Add :: :: ::: ::: ::: ::: ::: ::
			□Change
			□Add
		 	□Remove
			□ Change
			□ Add
			□ Remove
			Change

Typed or printed name of signee

Steven A Baer