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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

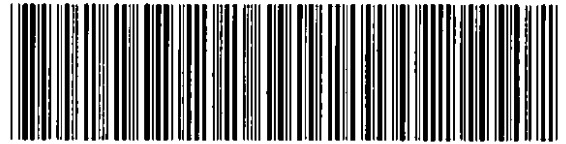
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2023 SEP 25 PM 4:43
CLERK OF DISTRICT COURT
STATE OF MONTANA

VIA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TWO SISTERS INVESTMENTS, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RONDA LINDSAY

Name of Person

TWO SISTERS INVESTMENTS, LLC

Firm/Company

45209 RIVER ROAD

Address

SHAWNEE, OK 74801

City/State and Zip Code

Flash2rl@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ronda Lindsay

Name of Person

at (405)

Area Code

382-4334

Daytime Telephone Number

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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

TWO SISTERS INVESTMENTS, LLC

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

The Articles of Organization for this Limited Liability Company were filed on JULY 17, 2023 and assigned
Florida document number L23000335526.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

TWO SISTERS INVESTMENTS OF FLORIDA, LLC

The new name must be distinguishable and contain the words "Limited Liability 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)

TWO SISTERS INVESTMENTS, LLC, AN OKLAHOMA L

554 CORAL COURT, UNIT 110

FORT WALTON BEACH, FL 32548

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

TWO SISTERS INVESTMENTS, LLC, (AN OKLAHOMA L

45209 RIVER ROAD

SHAWNEE, OK 74801

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

TWO SISTERS INVESTMENTS, LLC (AN OKLAHOMA L.L.C.)

New Registered Office Address:

554 CORAL COURT, UNIT 110

Enter Florida street address

FORT WALTON BEACH

City

, Florida 32548

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.


Linda Lindsey
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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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CLERK OF DISTRICT COURT
JULIA S. TAYLOR

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated AUGUST 8, 2023

Condo Property, Managing Partner
Signature of a member or authorized representative of a member

Typed or printed name of signer