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	egistration Se vision of Cor			
CHDIECT		OTTER REAL ESTATE, LLC		
SUBJECT:Name of Limited Liability Company				
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		Kimberlee J. De Biase, Esc	} .	
			Name of Person	
		Breger De Biase, PLLC		
			Firm/Company	
		200 S. Park Road, Ste. 160		
			Address	
		Hollywood, FL 33021		
			City/State and Zip Code	
		kim@bdblawyers.com	- 1	
		E-mail address: (f	o be used for future annual re	port notification)
For further	information co	oncerning this matter, please ca	all:	
Kimberlee	J. De Biase			1-44000
	Name of	f Person	at () Area Code	Daytime Telephone Number
Enclosed is	a check for th	e following amount:		
≡ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status &

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

Oocusign Envelope ID: F0FA1725-D3CB-447D-8A13-6D383576BFDC ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALBIN TROTTER REAL ESTATE, I			
(Name of the Limited I	Liability Company by it now appears Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liab Florida document number L13000130933	ility Company were filed on	09/17/2013	and assigned
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liability company her	<u>e</u> :	
The new name must be distinguishable and contain the word	s "Limited Liability Company." the des	ignation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable	le:	TALI	
(Principal office address MUST BE A STREET A	<u>4DDRESS)</u>		
		F CORPO	
Enter new mailing address, if applicable:		L CR	
(Mailing address MAY BE A POST OFFICE BO	<u></u>	00 A	<u> </u>
		· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered affice address has been addressed of the new registered of the Name of New Registered Agent:		cords, <u>enter the name of</u>	the new registered
New Registered Office Address:	Enter Floric	la street address	
		Florida	
	City	DIVI TAL	tip Code
New Registered Agent's Signature, if changing Reg		Sion F	ָרָר בַּ
I hereby accept the appointment as registered a provisions of all statutes relative to the proper of accept the obligations of my position as registed being filed to merely reflect a change in the reg company has been notified in writing of this cha	and complete performance of n red agent as provided for in Cl tistered office address, I hereby	ny duties, and I am-fami napter 605, F.S. िन्द्रोति	liar with and is document is

Kimberlee De Biamanager of Breger De Biase, PLLC

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MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
		<u></u>	□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Remove
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Note: If the date i	other than the date of filin listed, the date must be specific an nserted in this block does not we date on the Department of	ng:
f the record specifies a ecord is filed.	delayed effective date, but no	ot an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	January 16	2025
		Occusigned by:
	Signature of a	a member or authorized representative of a member
		Klaus Trotter

Filing Fee: \$25.00