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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
, , , , , ,
PICK-UP WAIT MAIL
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COVER LETTER

Registration Section

Division of Corporations

TO:

SUBJECT:	Lightfield Re	eality LLC ed Liability Company	·	•	
The standard of A	Amendment and fee(s) are subm	uited for tiling			
	ndence concerning this matter to				
	Adam Lightfield				
		Name of Person			
	CEG Enterprises LLC				
		Firm/Company	<u>. </u>	262	
	7235 18st NE		•		
		Address		[3	· · = 3
	St Petersburg FL 33702			<u> </u>	(1)
	City/State and Zip Code				
	Cegenterprises2020@gmail		-'	21 4: P3	
	E-mail address: (t	o be used for future annual report notif	ication)		
Fig. 6 whor information c	oncerning this matter, please ca				
	Cincerning the second of	727 338-6702			
Adam Lightfield	e Telephone Number				
Name o	of Person	Area Code Daytim	e Tetephone Number		
Enclosed is a check for t	he following amount:				
Α.		☐ \$55.00 Filing Fee &	□ \$60.00 Fil	ing Fee,	
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certificat Certified (additional	e of Statu Copy	
Mailing Addre		<u>Street Address:</u> Registration Sc	ection		
Division of Corporations Division of Corporations					
P.O. Box 63		The Centre of Tallahassee			
Tallahassee,		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	any as it now appears on Liability Company)				_	
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000110446</u>				_ and	assigned	d
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	bility company here:	;				
Lightfield Realty LLC				<u> </u>		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the desig	mation "LLC"	or the abb	reviation	ı "L.L.C."	
Enter new principal offices address, if applicable:				E3 E3		
(Principal office address MUST BE A STREET ADDRESS)				- *	1 1	—
) />	. :	123) P.	; 3	
Enter new mailing address, if applicable:	<u></u>		.150.5	11.	ر.	
(Mailing address MAY BE A POST OFFICE BOX)				03		. ~
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our rec	ords, <u>enter</u>	the name	e of the	e new re	gistero
Name of New Registered Agent:	- (A					
New Registered Office Address:	Enter Florid	a street addres	8			
		FL	orida			

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
			□ Add
		<u></u>	□Remove
			☐ Change
			□Add
			Remove Change Change Remove
			Remove □Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
			□Change

Typed or printed name of signee

Adam Lightfield