K21000126773

| | (Requestor's Name) | |
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| | (City/State/Zip/Phone #) | |
| PICK-U | P WAIT | MAIL |
| | (Business Entity Name) | |
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| | (Document Number) | |
| Certified Copies | Certificates of S | Status |
| Special Instruction | s to Filing Officer: | |
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2022 MAR -3 PH 4: 02
SECRETARY OF STATE

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

| Div | ision of Cor | porations | | And the second second |
|---------------------------------------|----------------|--|---|--|
| 0115 IV 00 | SUMMERI | LAND REALTY, LLC | · | |
| SUBJECT: | | Name of Limi | ited Liability Company | |
| The enclosed | d Articles of | Amendment and fee(s) are sub- | mitted for filing. | |
| | | ndence concerning this matter | _ | |
| | | | | |
| | | SHAMAHL LEE | | |
| | | | Name of Person | |
| | | SUMMERLAND REALT | Y, LLC | |
| | | · | Firm/Company | · |
| | | 182 N PALAFOX ST. SUI | TE 104B | |
| | | | Address | |
| | | PENSACOLA, FL 32502 | | |
| | | | City/State and Zip Code | |
| | | SHAMAHL@SLREALTYI | LLC.COM | |
| | | E-mail address: (| to be used for future annual report no | tification) |
| For further i | nformation c | oncerning this matter, please ca | all: | |
| SHAMAHL LEE | | 850 842 0106 at () | | |
| Name of Person | | | me Telephone Number | |
| Enclosed is | a check for th | he following amount: | | |
| | | _ | □ ¢55 00 PW F 8 | = \$60.00 P.U Pag |
| □ \$25,00 l | rung rec | ☐ \$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) |
| 14- | ilina Addus | | Street Address | |
| Mailing Address: Registration Section | | Street Address: Registration Section | | |
| | _ | Corporations | Division of Co | |
| P.0 | D. Box 632 | 27 | The Centre of | Tallahassee |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

SUMMERLAND REALTY, LLC

2022 MAR -3 PM 4: 02

(Name of the Limited Liability Company as it now appears on our restrict FTARY OF STATE

(A Florida Limited Liability Company)

TALLAMACOTE TALLAHASSEE, FL The Articles of Organization for this Limited Liability Company were filed on $\frac{03/17/2021}{}$ and assigned Florida document number __L21000126773 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." The new name must be distinguishable 182 N PALAFOX ST Enter new principal offices address, if applicable: SUITE 104B (Principal office address MUST BE A STREET ADDRESS) PENSACOLA, FL 32502 182 N PALAFOX ST Enter new mailing address, if applicable: SUITE 104B (Mailing address MAY BE A POST OFFICE BOX) PENSACOLA, FL 32502 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: New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to active this capacity. I further agree to comply with the provisions of all statutes relative to the proper and consider performance of my duties, and I am familiar with and accept the obligations of my position as registered again as provided for a 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.

City

Enter Florida street address

, Florida _

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> | Address | Type of Action |
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| Effecti | ve date, if other than the d | ate of filing: _ | not be prior to date o | filling or many t | (opti | onal) | 605 020 |
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