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Y. SCOTT APR 1 6 2022

COVER LETTER

TO: Registration S Division of Co			
271 REVE SUBJECT:	LS COURT , LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Robert C. Benedict		
		Name of Person	
	Wideikis, Benedict & Bern	ntsson, LLC - The Big W Law Firm	
		Firm/Company	202
	3195 S Access Road		Z MA
		Address	2022 MAR 31 SECRETARY TALLARY
	Englewood, Florida 34224		ASSET PH
	rbenedict@bigwlaw.com	City/State and Zip Code	PH 2: 35 OF STATE SSEE, FL
For further information of	E-mail address: (concerning this matter, please c	to be used for future annual report notification) all:	-
Robert C. Benedict		941 627-1000	
Name o	of Person	Area Code Daytime Telepho	one Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Fiting 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 Addre Registration Division of C P.O. Box 633	Section Corporations 27	Street Address: Registration Section Division of Corporatio The Centre of Tallahas	ssee
Tallahassee.	FL 32314	2415 N. Monroe Street	t, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

271 REVELS COURT, LLC

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

The Articles of Organization for this Limited Liability	Company were filed on	12/28/2021	and assigned
Florida document number L22000005936	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company	here:	
SG 9 RE, LLC			
The new name must be distinguishable and contain the words "Lin	mited Liability Company," th	ne designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		<u>S</u> 2
			221 221
			R T
Enter new mailing address, if applicable:			- Th ω
•			89 2 11
(Mailing address MAY BE A POST OFFICE BOX)			20
		1	- ω
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	ed office address on ou	r records, <u>enter th</u>	e name of the new registered
	•		
New Registered Office Address:	Enter i	Aorida street address	
	CHV	, Flori	da
New Registered Agent's Signature, if changing Register-	•		isp code
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and a accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance agent as provided for i red office address, I he	of my duties, and n Chapter 605, F.:	I am familiar with and S. Or, if this document is
	If Changing Registered	Agent, Signature of N	ew Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
		 	□Remove
		A.	Change Change
	·	HASSEE, FL	
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ffective date, if other than th	o data of filings						
an effective date is listed, the date mote: If the date inserted in this b	ist be specific and ca	innot be prior to	date of filing or m	ore than 90 days	o ptional) after filing,) Pursuan	nt to 605.02
ocument's effective date on the	Department of Sta	te's records.		g requirement.	c iii.s diice		oc used
record specifies a delayed effecti	ve date, but not ar	n effective time	e at 12:01 a.m.	on the earlier o	sê (b) - Tb	a 90th d	av after t
is filed.			2,01 (2.01 (1.11)	on the currier (7. (<i>0</i>) Th	c 70m u	ay anci ii
March 24		2022					
4		>	. •				
FL	Signature of a me	mber or authoriz	zed representative	of a member		_	

Filing Fee: \$25.00