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S. PRATHER

COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT:	Realtor Pae Name of Limi	+ Realty LLC ited Liability Company	
The enclosed Articles of Ai	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	<u>Nei</u>	la Montelus Name of Person	
	Realter P	Coet Realty LLC Firm/Company	
	5034 Kath	y Lane Address	
	West Palm Be	City/State and Zip Code	
	Meita Monte E-mail address: (t	lus @ Gmail-Com o be used for future annual report noti	fication)
For further information con	cerning this matter, please ca	ill:	
Neila Mor	He lus erson	at (<u>501</u>) <u>215 - 59</u> Area Code Daytim	172 e 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

7-1

23

	OF	7
	For Poet Bealty LLC Liability Company as it now appears on our records.) Florida Limited Liability Company)	PALED PH
The Articles of Organization for this Limited Liabi Florida document number <u>L 22.00001790</u>	ility Company were filed onO1/10/2022 05	<u> </u>
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of the		obreviation "L.L.C."
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET.)	·	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or regi agent and/or the new registered office address h	istered office address on our records, <u>enter the nan</u> nere:	ne of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
-	, Florida	Zin 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.

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>	Address	Type of Action
			
			□Remove
			□Change
			□Add
			□Remove
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