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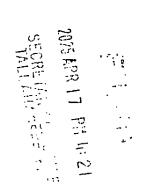
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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COVER LETTER

	istration Secsion of Cor					
	DJ BROOK	S RE LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	Articles of a	Amendment and fee(s) are sub-	mitted for filing.			
		ndence concerning this matter				
		DONALD BROOKS				
			Name of Person			
		DJ BROOKS RE LLC				
		 	Firm/Company			~- .
		11847 AUTUMN CREEK	DRIVE			150 P
			Address		• • •	PR
		RIVERVIEW, FL 33569				
			City/State and Zip Cod	le		2075 APR 17 PH W 21
		DJ@OUTFASTREALTY.C	OM to be used for future annu	al report notification	on)	12
For further in	iformation co	oncerning this matter, please ca		·		:*
DONALD B	ROOKS			324-2641		
	Name o	f Person	at () _ Area Code	Daytime Tele	ephone Number	
Enclosed is a	check for th	ne following amount:				
□ \$25.00 F		■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fe Certified Copy (additional copy is o		Certified	te of Status &
Reg Div	iling Addres gistration S vision of C), Box 632	Section Corporations	Regis Divis	Address: stration Section ion of Corpora Centre of Talla	ations	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DJ BROOKS RE LLC		
(Name of the Limited Liability (A Florida l	Company as it now appears on our records Limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Co Florida document number 1.23000464632	ompany were filed on October 09, 2023	and assigned
This amendment is submitted to amend the following:	-	
A. If amending name, enter the new name of the limit	ed liability company here:	
777 CASH BUYERS LLC		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	47.0
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres.	s
	ជា _រ	orida
-	City:	Zip 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 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
			□Add
			□Remove
			□Change
		 	□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
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			□Change
			□Add
			□Remove
			□Change
			🖸 Add
			□Remove
			□Change

Please change email address	on file to dj@777cashbuyers.com	

		·
		
		
		
		
It an effective date is listed, the date mu	e date of filing: st be specific and cannot be prior to date of filing or melock does not meet the applicable statutory filing tepartment of State's records.	(optional) ore than 90 days after filing.) Pursuant to 605.0207 (g requirements, this date will not be listed as the
ne record specifies a delayed effective ord is filed.	re date, but not an effective time, at 12:01 a.m. o	on the earlier of: (b) The 90th day after the
Dated April 14	2025	
		`
	Signature of a member or authorized representative	of a member
Namel d Berneler		
Donald Brooks	Typed or printed name of signee	

Filing Fee: \$25.00