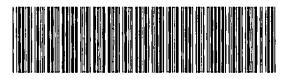
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COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations

TO:

SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Stephen W. Screnci, Esq.		
		Name of Person	
	Stephen W. Screnci, P.A.		
		Firm/Company	
	2700 North Military Trail.	Suite 355	
		Address	······
	Boca Raton, FL 33431		
	·	City/State and Zip Code	
	sws@screncilaw.com		
	E-mail address: (to be used for future annual report notif	ication)
For further information con	ncerning this matter, please ca	all:	
Stephen W. Screnci, Esq.		561 300-3390 at ()	
Name of	Person	Area Code Daytime	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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:		Street Address: Registration Sec	rtion
Registration Se Division of Co		Division of Corp	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TYLER & BRETT PROPERTIES, L.L.C.	
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were for a document number \(\frac{L02000034783}{L02000034783}\).	filed on 12/26/2002 and assigned
this amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability co	ompany here:
he new name must be distinguishable and contain the words "Limited Liability Con	npany," the designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	FILED : 95 4: 05
. If amending the registered agent and/or registered office addres gent and/or the new registered office address here:	s on our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	0. 51.11
	Enter Florida street address
	Florida

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.

City

Zip Code

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
P	Robert A. Zimmerman	6991 North State Road 7, 2nd Floor	□Add
		Parkland, FL 33073	≅Removc
			□Change
MGR Robert A. Zimmerman	Robert A. Zimmerman	6991 North State Road 7, 2nd Floor	= Add
		Parkland, FL 33073	□Remove
			□Change
			2027 Add
		- 	Remove
			——□Change ○ ○ □ Add
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i Waati	ve date, if other than the date of filing: (optional)
lf an effe	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
	·
e recore	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is file	rd.
	Drownhor 28 2020
Dated	December 28 2020
_	
-	117

Typed or printed name of signee