L03000018413

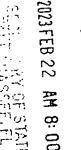
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COVER LETTER

TO: Registration Section

Division of Cor	poration's		
Randy Wis	e Homes Realty, LLC		•
SUBJECT:	e Homes Realty, LLC Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Dawn E. Stuntz		
		Name of Person	
	Matthews & Jones, LLP		
		Firm/Company	
	4475 Legendary Drive		
	-	Address	
	Destin, FL 32541		
		City/State and Zip Code	
	rschmidt@randywisehomes		
	E-mail address: (to be used for future annual report no	otification)
For further information of	oncerning this matter, please c	all:	
Dawn E. Stuntz		850 460-3134 at ()	
Name o	f Person	Area Code Dayt	ime Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	S30.00 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 Addres		Street Address: Registration S	Section
Division of Corporations		Division of Corporations	
P.O. Box 632		The Centre of	`Tallahassee roe Street, Suite 810
Tallahassee, I	ロレ ウムチ14	2410 IN. MOIII	ioc succi, sunc otv

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Randy Wise Homes Realty, LLC		
(Name of the Limited Liability Compa (A Florida Limited)	iny <mark>as it now appears on our records</mark> Ciability Company)	<u>r)</u>
The Articles of Organization for this Limited Liability Company Florida document number L03000018413	were filed on May 22, 2003	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Randy Wise Realty, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	
Enter new principal offices address, if applicable:	127 Partin Drive North	023 F
(Principal office address MUST BE A STREET ADDRESS)	Niceville, FL 32578	EB 22
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	127 Partin Drive North Niceville, FL 32578	AM 8: 00 SSEE, FL
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		
	Enter Florida street address	;
		orida Zip Code
	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 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
			Change
			□ Add
			□Remove
			Change
			□ Add
			□Remove
			Change
			□Add
			Remove
		 	□Change
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			□Remove
			□ Change

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Note: If the date in	other than the date of filing:	5.0207 (: ted as tl
he record specifies a ord is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
January 17	2023	
	at the	
´ Ø	9-11-	

Filing Fee: \$25.00

Typed or printed name of signee