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Tc:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH OF BOCA RATON

Account Number : 076376001555 Phone : (803)255-9617 Fax Number : (561)483-7321

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____ Dayna@daynamanagement.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN P.C. REALTY VENTURES, L.L.C.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	LIY VENTURES,			
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Lize Horida document number	ıbility Company	were filed onSept	ember 16, 2003	and assigned
This amendment is submitted to amend the follo	 wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the wo	rds "Limited Liabil	lity Company," the design	ation "LLC" or the abl	neviation "L.L.C."
Enter new principal offices address, if applicable:		6590 W. Rogers Cir	cle	
(Principal office address MUST BE A STREET ADDRESS)		Suite 8		
		Boca Raton, FL 334	187	
Enter new mailing address, if applicable:		6590 W. Rogers Cir	rcle	51.31
(Mailing address MAY BE A POST OFFICE BOX)		Suite 8		
		Boca Raton, FL 334	87	
B. If amending the registered agent and/or re agent and/or the new registered office address		address on our recor	ds, <u>enter the name</u>	of the new register
Name of New Registered Agent:	Dayna N. Carrano			
New Registered Office Address:	6590 W. Rog	gers Circle, Suite 8		
	Enter Florida street address			
	Boca Raton		, Florida _ ³³	487
		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.

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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 AMRR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Carolyn Carrano	12525 Oak Arbor Lane	[] Add
		Boyton Beach, FL 33436	⊠Remove
MGR Dayna N. Carrano	6590 W. Rogers Circle	(X) Add	
	Suite 8	ERemove	
		Boca Ration, FL 33487	□Change
		🗀 Add	
		□Remove	
			LI Change
	-1	□Add	
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		[] Change	
		(JAdd	
		□Remove	
			□ Change
		DAdd	
		□Remove	
			i T Change

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	iding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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-	
Note: 1	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 to make effective date on the Department of State's records.
he record ord is file	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 ed.
Dated _	December 21 2023
1	Signature of a member or authorized representative of a member
(Dayna N. Carrano
	Typed or printed name of signee