## 103000037226

| (Re                     | questor's Name)    |                                       |
|-------------------------|--------------------|---------------------------------------|
| (Ad                     | dress)             |                                       |
| (Ad                     | dress)             |                                       |
| (Cit                    | ry/State/Zip/Phone | e #)                                  |
| PICK-UP                 | ☐ WAIT             | MAIL                                  |
| (Bu                     | siness Entity Nar  | ne)                                   |
| (Do                     | cument Number)     | · · · · · · · · · · · · · · · · · · · |
| Certified Copies        | _ Certificates     | s of Status                           |
| Special Instructions to | Filing Officer:    |                                       |
|                         |                    |                                       |
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## **COVER LETTER**

|            | Registration Se<br>Division of Cor |  |   |                                       |  |   |
|------------|------------------------------------|--|---|---------------------------------------|--|---|
| SUBJEC     | 213 LLC                            |  |   |                                       |  |   |
| SUBJEC     | 1 :                                | Name of Lin                                  | nited Liability Company   | <u> </u>                              | <del></del>  |   |
|            |                                    |  |   |                                       |  |   |
| The enclo  | sed Articles of                    | Amendment and fee(s) are sub                 | omitted for filing.   |                                       |  |   |
| Please ret | urn all correspo                   | ndence concerning this matter                | to the following:   |                                       |  |   |
|            |                                    | Brenda J Gray                                |   |                                       |  |   |
|            |                                    |  | Name of Person  |                                       |  |   |
|            |                                    | 213 LLC                                      |   |                                       |  |   |
|            |                                    |  | Firm/Company  |                                       | <del></del>  |   |
|            |                                    | 17582 Brown Rd                               |   |                                       |  |   |
|            |                                    |  | Address   | · · · · · · · · · · · · · · · · · · · |  |   |
|            |                                    | Odessa FL 33556                              |   |                                       | <del></del> 1  |   |
|            |                                    |  | City/State and Zip Code   |                                       | 2821<br>SEC  |   |
|            |                                    | brenda@grayhomes.com  E-mail address: (      | to be used for future annual report                                 | notification)                         | 2021 MAY 2<br>SECRETAR   | 1 |
| For furthe | r information co                   | oncerning this matter, please c              | ·   |                                       | ਜ਼ਿ≺ <i>ਰ</i> ਾ<br>ਸ਼ <sub>ਾ</sub>                             |   |
| Brenda J   | Gray                               |  | 813-957   | -1642                                 | F S 3  | D |
|            | Name of                            | Person                                       |   | ytime Telephone Num                   |  |   |
| Enclosed   | is a check for th                  | e following amount:                          |   |                                       |  |   |
| \$25.00    | ) Filing Fee                       | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certifi<br>Certifi                    | Filing Fee,<br>cate of Status<br>ed Copy<br>nal copy is enclos |   |
|            |                                    |  |   |                                       |  |   |

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| 213 LLC   |  |   |                                   |
|---|--|---|-----------------------------------|
| (Name of the Limi   | ted Liability Compa<br>(A Florida Limited) | ny as it now appears on our red<br>Liability Company) | cords.)                           |
| he Articles of Organization for this Limited L<br>lorida document number L03000037226 | iability Company                           | were filed on 09/20/2003                              | and assigned                      |
| his amendment is submitted to amend the following                                     | lowing:                                    |   |                                   |
| . If amending name, enter the new name o  | of the limited liab                        | ility company here:                                   |                                   |
|   |  |   |                                   |
| he new name must be distinguishable and contain the                                   | words "Limited Liabi                       |   | LLC" or the abbreviation "L.L.C." |
| nter new principal offices address, if applicable:                                    |  | Unchanged   | <u> </u>                          |
| <u>Principal office address MUST BE A STREI</u>                                       | ET ADDRESS)                                | 17582 Brown Rd  | 2821                              |
|   |  | Odessa FL 33556                                       |                                   |
| Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  |  | 17582 Brown Rd  | Y 26<br>TARY<br>ASSEE             |
|   |  | Odessa FL 33556                                       | 7 7 0                             |
|   |  | <u></u>   | ORDER 2                           |
|   |  |   | 20<br>DA                          |
| If amending the registered agent and egistered agent and/or the new registered of     |  |   | ords, enter the name of the       |
| seasoned agent and of the new seasoned to   |  | <b>-</b>  |                                   |
| Name of New Registered Agent:   | N/A  |   |                                   |
| New Registered Office Address:  | N/A  |   |                                   |
|   |  | Enter Florida street ac                               | idress                            |
|   | **************************************     |   | , Florida                         |
|   |  | 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, <u>enter the title, name, and address of each person\_being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>         | <u>Address</u>  | Type of Action   |
|--------------|---------------------|-----------------|--|
| AMBR         | Valerie G Fugit     | 17582 Brown Rd  | Add  |
|              |                     | Odessa FL 33556 | ■ Remove   |
|              |                     |                 | Change   |
| AMBR         | Kimberly G Mangum   | 17582 Brown Rd  |  |
|              |                     | Odessa FL 33556 | ■ Remove   |
|              |                     |                 | □ Change   |
| AMBR         | Melanie G Farrell 1 | 17582 Brown Rd  |  |
|              |                     | Odessa FL 33556 | Remove   |
|              |                     |                 | - Change   |
|              |                     |                 | Change Ch |
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|              |                     |                 | FLORRIC Change   |
|              |                     |                 | □ Add  |
|              |                     |                 | ☐ Remove   |
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|              |                     |                 | Remove   |
|              |                     |                 | ☐ Change   |

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| May 13, 2017   | (ontional)  |
| fective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to date of filing or m      | (optional) ore than 90 days after filing.) Pursuant to 605.0207 (3) |
| ote: If the date inserted in this block does not meet the applicable statutory filing<br>cument's effective date on the Department of State's records. | g requirements, this date will not be listed as the                 |
|  |   |
| record specifies a delayed effective date, but not an effective t<br>The 90th day after the record is filed.   |   |
|  |   |
| ted May 19, 2017.  |   |
| Brenda J Gray  Brenda J Gray   |   |

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Typed or printed name of signee

Filing Fee: \$25.00