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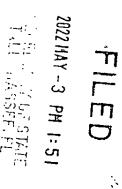
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C. BRUMBLEY
JUN 2 4 2022

COVER LETTER

	lealty, LLC	·	•
bicci:	Name of Lim	ited Liability Company	
e enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
ase return all correspo	ondence concerning this matter	to the following:	
	Nicole Gabbard		
		Name of Person	
	Re/Quest Realty		
		Firm/Company	
	3703 162nd Ave E		
		Address	
	Parrish, FL 34219		
		City/State and Zip Code	
	gabbardnj@verizon.net		
further information of	concerning this matter, please c	to be used for future annual report notif	ication)
cole Gabbard		941 685-0451 at ()	
Name o	of Person	Area Code Daytime	: Telephone Number
closed is a check for t	he following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status of Certified Copy (additional copy is enclosed)

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Re/Quest Realty, LLC				
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our records.) d Liability Company)			
The Articles of Organization for this Limited Liability Compar	ny were filed on 08/11/2006	an	nd assign	neđ
Florida document number L06000079453				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liz	ability company here:			
Parrish Realty of Florida, LLC				
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	ibbreviati	on "L.10	C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
	·		-k	
		1-,	2022 HA	
Enter new mailing address, if applicable:			HA	71
(Mailing address MAY BE A POST OFFICE BOX)		<u>., </u>	1	
		シュ ジンニ		, Tr
			<u> </u>	
B. If amending the registered agent and/or registered office	e address on our records, <u>enter the na</u>		e pew 1	registere
agent and/or the new registered office address here:		ιщ		ķ
				,,
Name of New Registered Agent:			<u>_</u>	
New Registered Office Address:				
	Enter Florida street address			
	, Florida _			
	City	Zin	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>	Name	Address	Type of Action
			□Add
			🗆 Remove
		Change	
		□Add	
			□Remove
			Change
		□Add	
		□Remove	
			☐ Change
		🗆 Add	
			Remove
			Change
		□Add	
		□Remove	
			□Add
			□Remove

11 4111	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an el	tive date, if other than the date of filing:
the reco	rd 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 iled.
Dated	April 28 2022 Signature of a member or authorized representative of a member
	Nicole A Gabbard
	Typed or printed name of signee

Filing Fee: \$25.00