L08000065654

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COVER LETTER

Division of Cor	porations					
Cornerstone SUBJECT:	Cornerstone Real Estate & Management LLC -					
Name of Limited Liability Company						
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.				
Please return all correspo	indence concerning this matter	to the following:				
	Paul Svilokos					
	<u> </u>	Name of Person				
	Cornerstone Real Estate & Management LLC.					
	Firm/Company					
	8499 S. Tamiami Trl. #214					
		Address				
	Sarasota, Fl 34238					
	paulsvilokos@gmail.com	City/State and Zip Code				
For further information c	t;-mail address; (t oncerning this matter, please ca	o be used for future annual report notifi all:	cation)			
Paul Svilokos		941 6504720 at ()				
Name o	l Person	at ()	Telephone Number			
Enclosed is a check for th	ne 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 & Certified Copy (additional copy is enclosed)			
Mailing Address: Registration Section		Street Address: Registration Sect	da.			

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

TO:

Registration Section

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

(<u>Name of the Limited Li</u>	ability Company as it now appears on ou orida Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liabili Florida document number L08000065654	ty Company were filed on 7/8/2008	
This amendment is submitted to amend the following		
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX		
		14440
B. If amending the registered agent and/or regist agent and/or the new registered office address he	ered office address on our records re:	enter the name of the new register.
	<u></u> -	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	t address
	···	, 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

: 23

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
AMBR	Elizabeth Wild Svilokos	9622 Knightsbridge Cir Sarasota, Fl 34238	= Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			DAdd
			□Remove
			□Change
			
		□Remove	
			□ Change
			□Add
			□Remove
			Cr. Co. Chiadge
			Addt
		P. Remove	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: 8/14/2024 (optional) (If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Signature of a member or authorized representative of a member Paul Svilokos Typed or printed name of signee

Filing Fee: \$25.00