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(Requestor's Name)				
(Add	ress)			
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(City	/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO:	Registration Se Division of Cor		• .	•	
	Heritage Ho	ouse Realty, Int'l, LLC			
SUBJI	ECT:			· 	
		Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		Jodi N Wallis			
Name of Person					
			Firm/Company		
		241 Riverside Dr. #501			
			Address		
Holly Hill, FL 32117					
		Jodiwallislive@outlook.com	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
		E-mail address: (to be used for future annual report n	otification)	
For fur	ther information c	oncerning this matter, please ca	all:		
Jodi N	Wallis		407 212-8802		
	Nt	£ D	at ()	ime Telephone Number	
	Name o	f Person	Area Code Dayt	ime Telephone Number	
Enclos	ed is a check for th	ne following amount:			
■ \$2	5.00 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 Addres Registration S		Street Address: Registration S	Section	

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

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

Heritage House Realty Int'l, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ______ and assigned Florida document number _____110000031263 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Heritage House Realty and Law, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida ___ City

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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) (optional) E. Effective date, if other than the date of filing: (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. July 17 2023 Dated ____

inhature of a member or authorized representative of a member

Typed or printed name of signee

Jodi N. Wallis

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
		 	□Add
		 	□ Remove
			Change
			□Add
			□Remove
			Change
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