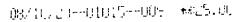
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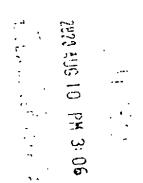
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Registration Section Division of Corporations

FO:

NAREHO SUBJECT:	OD REALTY LLC Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
lease return all corresp	ondence concerning this matter	to the following:	
	GENGER NAREHOOD		
		Name of Person	
		Firm/Company	(5) (5)
	8345 COLONY BARN RO	. ,	22.3 AUG 10 PM 3: 06
		Address	O
	CLERMONT, FL 34714		
	GLN@EARTHLINK.NET	City/State and Zip Code	-
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report notification)	
GENGER NAREHOOD		352 409-2901	
Name o	of Person	at () Area Code Daytime Teleph	none Number
Enclosed 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Division of O P.O. Box 633 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporation The Centre of Tallaha 2415 N. Monroe Street Tallahassee, FL 3230.	issee et, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NAREHOOD REALTY 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 $\frac{12/15/2010}{1}$ and assigned Florida document number 1.10000128050 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GENGER NAREHOOD 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

, Florida

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
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			□ Change
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fective date, if other than the date of n effective date is listed, the date must be speciote: If the date inserted in this block does cument's effective date on the Department	ific and cannot be prior to s not meet the applicab			ng.) Pursuant to 605.020
ecord specifies a delayed effective date, but is filed.	ut not an effective tim	ne, at 12:01 a.m. on th	e earlier of: (b)	The 90th day after th
08/06/2020 ted	·	<u>.</u> ·		
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