## L110000024270

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## COVER LETTER

TO:

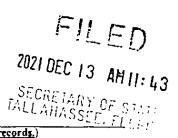
Tallahassee, FL 32314

TO:	Registration : Division of Co		-	
SUBJEC	R.K.P. Re	al Estate Holdings, LLC		
203020		Name of Li	mited Liability Company	<del></del>
The encl	osed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
		ondence concerning this matte		
		Robert Posner		
		<del></del>	Name of Person	<del></del>
			Firm/Company	<del></del> ,
		1800 Purdy Avenue, Unit	1915	
			Address	<del></del>
		Miami Beach, FL 33139		
		******	City/State and Zip Code	<del></del>
		ROBERT K POS E-mail address:	OCRO (7M(liL, (OM) (to be used for future annual report notification)	
For furthe	r information c	oncerning this matter, please c	all:	
RO		POSNER	at (305) 700 - 7631 Area Code Daytime Telephone Nur	
	Name o	f Person	Area Code Daytime Telephone Nur	nber
Enclosed i	s a check for th	ne following amount:		
□ \$25.00	) Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	O Filing Fee, ficate of Status & fied Copy onal copy is enclosed)
R D	lailing Address egistration S livision of Co O. Box 632	ection orporations	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



R.K.P. Real Estate Holdings, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

_	ability Company were filed on 02/25/2011	and assigned
Florida document number L11000024270	<del></del> •	
This amendment is submitted to amend the follo	owing:	
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 "LLC" or the abbreviation "LLC."  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 Agent:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address		
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
B. If amending the registered agent and/or re	egistered office address on our records, e	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street d	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

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
MGRM	Robert Posner	1800 Purdy Avenue Unit 1915	□Add
		Miami Beach, FL 33139	■Remove
			□ Change
MGRM	Moneypenny RKP, L.L.C.	8160 Butherus Drive, Suite 4	
		Scottsdale, AZ 85260	□Remove
		<u> </u>	Change
			□Add
			Remove
			☐ Change
			□Add
			∐Rcmove
			□Add
			□ Remove
			Change
			□Add
			□ Remove

_	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an elle <u>ote:</u>	ive date, if other than the date of filing:
is fil	
ated_	Dec 10 , 2021.  Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00