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## **COVER LETTER**

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SUBJE	HUNTINGT) (CT:	HUNTINGTON SIGNATURE REAL ESTATE, LLC						
		Name of Lim	ited Liability Compa	ny.				
The en	closed Articles of A	tmendment and fee(s) are sub	mitted for filing.					
Please	return all correspon	dence concerning this matter	to the following:					
		Kristen King Jaiven						
Kristen King Jaiven, Lawyer, PLLC								
			Firm/Compar	ıy				
		418 SW 11th Street						
	Fort Lauderdale FL 33315							
		kristen@kkjlawyer.com	City/State and Zip	Code				
Division of Corporations  HUNTINGTON SIGNATURE REAL ESTATE, LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and feets) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Kristen King Jaiven  Name of Person  Kristen King Jaiven, Lawyer, PLLC  Firm/Company  418 SW 11th Street  Address  Fort Lauderdale FL 33315  City/State and Zip Code  kristen@kkjlawyer.com  E-mail address: to be used for luture annual report notification)  For further information concerning this matter, please call:  Kristen King Jaiven  Name of Person  Area Code  Daytime Telephone Number  Name Telephone Number								
For fur	ther information co	ncerning this matter, please c	att:					
Kristen	King Jaiven			590-9686		2023 I SEC	:=T:1	
,	Name of	Person		e Daytine	e Telephone Number	DEC 27		
Enclose	ed is a check for the	e following amount:				388 30 Y 1888		
<b>■</b> \$2.	5.00 Filing Fee		Certified Copy Certifica (additional copy is enclosed) Certified			of States & P	<i>الح</i>	
	Mailing Address		St	enat Addracce				

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

HUNTINGTON SIGNATURE REAL ESTATE, LLC

(Name of the Lin		pany as it now appears on ou d Liability Company)	r records.)	<del></del>	
The Articles of Organization for this Limited  Torida document numberL1200008	Liability Compan			and assig	ned
his amendment is submitted to amend the fo	llowing:				
a. If amending name, enter the new name	of the limited lia	bility company here:			
The new name must be distinguishable and contain the		bility Company." the designation	on "LLC" or the abbr	eviation "L.L.	<u>C."</u>
Principal office address MUST BE A STRE	ET ADDRESS)				
Enter new mailing address, if applicable:  [Mailing address MAY BE A POST OFFICE BOX]		9080 Kimberly Bouleva	ard		
		Boca Raton, FL 33434		) (23)	
3. If amending the registered agent and/or gent and/or the new registered office addr	registered office ess here:	address on our records	2	,	ا ا registe
Name of New Registered Agent:	Jack Jaiven			F S 8:	ģ
New Registered Office Address:	9080 Kimberl	y Boulevard, Suite 12		ATE 40	
	Boca Raton	Enter Florida str <b>ee</b>		А	
	Docu Italon		Florida <sup>3343</sup>	7	

## 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Ben Schachter	9080 Kimberly Boulevard	
		Suite 12	□Remove
		Boca Raton, FL 33434	■Change
MGR	Jack Jaiven	9080 Kimberly Boulevard	□Add
		Suite 12	
		Boca Raton, FL 33434	<b>■</b> Change
			□Add
		<del></del>	□Remove
			Hange Planner SECPLIANA
			23 DEE 27 M 8: 05 TALL MHASSIE, FL
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

D. If amend	ing any other information, enter o	change(s) here:	(Attach addition	nal sheets, if necess	sarv.)	
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Note: If t	date, if other than the date of filir we date is listed, the date must be specific ar he date inserted in this block does not 's effective date on the Department of	meet the applicab	date of filing or mo ble statutory filing	(option re than 90 days after fil requirements, this d	al) 근도 를 ling.) Purşuqut te	<b>)</b> 05.0207 (3)(b
If the record sprecord is filed.	pecifies a delayed effective date, but no	ot an effective tim	e, at 12:01 a.m. o	n the earlier of: (b)	The 90th day at	ter the
Dated	September 27    Signature of a	2023				
	1 inha					
	Signature of a	member or authori	ized representative (	of a member	_	
	Kristen King Jaiven	45 1				
		Typed or printed	name of signee			

Filing Fee: \$25.00