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(F	Requestor's Name)
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(F	Address)
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(C	Oocument Number)
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16 DEC 19 M 8 23 SECRETARY OF STATE

D. SCOTT DEC 2 2 2016

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: Los	BLALLY REALT	, LLC		
		ted Liability Company		
-				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	PATR	LK D'NEILL		
		Name of Person		
	Lo	BLOLLY		
		Firm/Company		
	740	7 SE HILL TE	MACE	
	Hose	Sound FL 33	3455	
	Poneilla E-mail address: (1	Address Sound FL 33 City/State and Zip Code City/State and Zip Code City/State and Zip Code	Com_	
For further information co	oncerning this matter, please ca			
0	a			
Name of	Person	at (<u>77Z</u>) <u>545 ·</u> Area Code Daytime	Z S 3 S Telephone Number	
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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 Certificate of Certified Contact (additional contact)	PRINCIPLE OF THE PRINCI
Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle	M & 23 FSTATE FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liabi (A Florid	
	lity Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number	Company were filed on 10/15/2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office ad-	
registered agent and/or the new registered office ad	dress here:
registered agent and/or the new registered office ad Name of New Registered Agent:	
registered agent and/or the new registered office ad Name of New Registered Agent:	Enter Florida street address , Florida City Zip Code

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> **Address Type of Action** MGR JILL CHRISTU 7407 SE HILL TERRALL HORE SOUND, FL 33455 DRemove □ Change DOROTHY BLACKWELL MUR 7407 SE HILL TERRACE Add Hose Sown FL 33465 ☐ Remove ☐ Change ☐ Add ☐ Remove □ Change □ Add ☐ Remove □ Change Remove Charige ☐ Add ☐ Remove ☐ Change

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an effective date is liste	er than the date of filed, the date must be specific	and cannot be prior to	date of filing or m	ore than 90 days afte	r filing.) Purșuant to 60	05.0
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	Signature o	of a member or author	ized representative	of a member	<u> </u>	
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Page 3 of 3

Filing Fee: \$25.00