

L13 0000 SLHIS

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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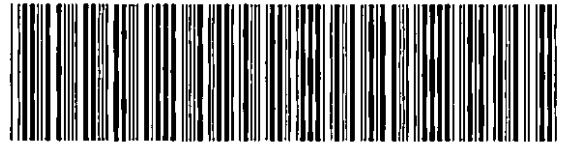
(Business Entity Name)

(Document Number)

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TALLAPATI, S. M.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHALIMON REAL ESTATE INVESTMENT LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID CHALIMON

Name of Person

CHALIMON REAL-ESTATE INVESTMENT, LLC

Firm/Company

631 U.S. HIGHWAY ONE, SUITE 309

Address

NORTH PALM BEACH, FL, 33408, US

City/State and Zip Code

david.chalimon@hotmail.com hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALISON MISCHKE

954 561-5670
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

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TALLAHASSEE, FL

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CHALIMON REAL ESTATE INVESTMENT 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 APRIL 17, 2013 and assigned
Florida document number L13000056415

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 "L.L.C."

Enter new principal offices address, if applicable:

631 U.S. HIGHWAY ONE, SUITE 309

(Principal office address MUST BE A STREET ADDRESS)

NORTH PALM BEACH, FL, 33408, US

Enter new mailing address, if applicable:

2934 RUE DE CHAMONIX

(Mailing address MAY BE A POST OFFICE BOX)

MONTREAL, QC

H4R 3B8, CANADA

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:

ALISON MISCHKE

New Registered Office Address:

631 U.S. HIGHWAY ONE, SUITE 309

Enter Florida street address

NORTH PALM BEACH

Florida 33408

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>	<u>Address</u>	<u>Type of Action</u>
MGR	DAVID CHALIMON	2934 RUE DE CHAMONIX	<input type="checkbox"/> Add
		MONTREAL, QC	<input type="checkbox"/> Remove
		H4R 3B8, CANADA	<input checked="" type="checkbox"/> Change
MGR	LOUIS-JULIEN CHALIMON	2934 RUE DE CHAMONIX	<input checked="" type="checkbox"/> Add
		MONTREAL, QC	<input type="checkbox"/> Remove
		H4R 3B8, CANADA	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SECRETARY OF DEFENSE
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 07-15-2024 BY 60322
1043

202 JUL 15 PM 2:37
SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 08-11-2001 BY 60322 UCBAW

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.

Dated JUNE 10, 2024 MONTREAL

Signature of a member or author

Signature of a member or authorized representative of a member

DAVID CHALIMON

Typed or printed name of signee

Filing Fee: \$25.00