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## **COVER LETTER**

TO: Registration So Division of Cor		_ 1	- 1	
SUBJECT:	ealey Team Name of Lim	A Realited Liability Company	Estate	Company L.L.C.
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Bri	On Sealey Name of Person		
	<del></del>	Firm/Company		
	1245 (ed	ar Center	Dr	
	TH	IFL 32300	1	
	E-mail address: (	City/State and Zip Code  Code	n Com	
For further information e	oncerning this matter, please ca	all;		
Brian Name o	Sealey	at ( <u>850</u> ) <u>270</u> Area Code Daytim	-5280 e Telephone Number	- <del>-</del>
Enclosed is a check for the	ne 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 Certificate of Certified Cop tadditional copy	Status & y
Mailing Addres Registration S Division of C	Section orporations	Street Address: Registration Sec Division of Cor	porations	
P.O. Box 632	1	The Centre of T	arranassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

mited 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 Florida document number 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," 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 Office Address: Enter Florida street address

## 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.

Cin

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
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