L15000113350

(Requestor's Name) (Address) (Address)	100397664141		
(City/State/Zip/Phone #) PICK-UP (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: Office Use Only	2/7/23 **30.00 2/7/23		

COVER LETTER

TO: Registration Section Division of Corporations

SANDERLING REALTY TRUST LLC

SUBJECT: _

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 L Evans

Name of Person

Law Offices of David L Evans

Firm/Company

PO Box 1047

Address

Clifton Park, NY 12065

City/State and Zip Code

dlevans.esq@gmail.com

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

at (_

For further information concerning this matter, please call:

David L Evans

Name of Person

518 469-6339 (_____) _____ Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

S30.00 Filing Fee & Certificate of Status

S55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$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 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Talłahassee 2415 N. Monroe Street, Suite 810 Talłahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SANDERLING REALTY TRUST LLC

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

The Articles of Organizatio	n for this Limited Liability Company were filed on _	06/30/2015	and assigned
Florida document number _	L15000113350		

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

SANDERLING REALTY LLC

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)

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B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ao	ldress
		. 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, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
			🗋 Add
			🗆 Remove
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			□Change
			🗆 Add
			□Remove
			□ Change

Page	2	of	3
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	November 10	1	1 in	2022	
		i llan	Klur		
	/	(s	ignature of a n	nember or authorized representative of a member	2F
	David L. Evans				

Typed or printed name of signee

Filing Fee: \$25.00