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S. ROBERTS
JUN 1 5 2023

COVER LETTER

TO:	Registration Sec Division of Corp			
oun e		OPERTIES, LLC		
SUBJE	SCI:	Name of Lim	ited Liability Company	
The en	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	us &
		ANGELA BRADHAM		
			Name of Person	
		RANEY PROPERTIES, L	LC	
			Firm/Company	
		P.O. BOX 1801		
			Address	
		OCALA FL 34482 344	18	
			City/State and Zip Code	
		ANGELA@RANEYS.COM		us &
		E-mail address: (to be used for future annual report notification)	
For fur	ther information co	oncerning this matter, please ca	all:	
ANGE	LA BRADHAM		352 438-4815	
	Name of	Person	at () Area Code Daytime Telephone Number	
Enclose	ed is a check for the	e following amount:		
■ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RANEY PROPERTIES, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con	mpany were filed on <u>04/08/2016</u> a	nd assigned
lorida document number L16000069811	<u>.</u>	
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
	<u> </u>	20
he new name must be distinguishable and contain the words "Limite		• • • •
Enter new principal offices address, if applicable:	<u> </u>	AP3
Principal office address MUST BE A STREET ADDRE	<u></u>	27
		70
		5
Enter new mailing address, if applicable:		<u></u>
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered of	office address on our records, <u>enter the name of t</u>	he new regist
gent and/or the new registered office address here:		
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street address	
	vnier r ioriaa street aaaress	
	Florida	(1.1
	City Zir	r 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 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>	Address	Type of Action
MGR	CORNELIUS D. RANEY	P.O. BOX 1801, OCALA, FL 34478	□Add
			■Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			Remove
			□Change
			□ Remove
			□Change
			□Add
			□Remove
			□ Changa

NAME TO THIS COMPANY	TO OBTAIN LINES OF CREDIT FOR CELLULAR PHONE ACCOUNTS IN	_
THE NAME OF THIS LLC.	CORNELIUS D. RANEY IS NOT KNOWN TO THE OWNERS/MANAGERS	_
OF THIS LLC.		_
		_
		_
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Fective date, if other than the dan effective date is listed, the date must bote: If the date inserted in this blococument's effective date on the Dep	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6 ck does not meet the applicable statutory filing requirements, this date will not be li	.05.0207 (isted as t
	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day af	ter the
record specifies a delayed effective is filed.		
	. 2023	
is filed. ated APRIL 18.		

Filing Fee: \$25.00