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## **COVER LETTER**

Tallahassee, FL 32314

TO: Registration Section Division of Corporation			
SUBJECT: ()UI	Town Realty 6	Grown LLC	
30 <b>1</b> 3000	Name of Lim	ited Liability Company	
The enclosed Articles of Am	endment and fee(s) are sub	mitted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
	ţ	HNZ1Ker Name of Person	
	Outo	wn Realty Group Firm/Company	,LC
	1414 NW 1	32nd Blvd.,	
	Newbe	erry FL 32669  City/State and Zip Code  Ohunzi Kertram.  To be used for future annual report notific	<u> </u>
-	E-mail add/ess: (	b be used for future annual report notific	COM cation)
For further information conc	erning this matter, please ca	all:	
Randy Hunz Name of Pe	rson	at ( <u>H017</u> ) <u>691-7</u> Area Code Daytime	817 Telephone Number
Enclosed is a check for the fo	ollowing 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Sec	tion	Street Address: Registration Sect	tion
Division of Corp		Division of Corp	
P.O. Box 6327		The Centre of Ta	ıllahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ourtown Realty		
( <u>Name of the Limited Liability Comb</u> (A Florida Limited		1 4 mg
The Articles of Organization for this Limited Liability Company	y were filed on $\mathcal{I}$	one 16, 2016 and assigned
Florida document numbo L16COO116Z3C	)	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	:
The new name must be distinguishable and contain the words Limited Liab	bility Company," the desig	gnation "LLC" or the abbreviation "L.L.C."
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 agent and/or the new registered office address here:	address on our reco	rds, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida	street address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>t:</u>	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic	te performance of my s provided for in Cha	oduties, and I am familiar with and upter 605, F.S. Or, if this document is

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>	Name	Address	Type of Action
VP	Kyle M. Hunziker	5112 NW 21ST Drive	🗀 Add
	•	5112 NW 21ST Drive Gaincsville, FL 32605	Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
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			□Change

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	all and the state of the state
	rd 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 iled.
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Filing Fee: \$25.00