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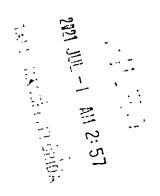
| (Requestor's Name) |
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| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: Cantempo Realty 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: |
| Barbara Turi Name of Person |
| Firm/Company |
| 1204 Lawnside Ave. |
| Sa Tety Harbor, FL 34695 City/State and Zip Code barbara turi @ gmail. Com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Barbara TuRi at (860) 391-2474 Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$\times \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\times \text{\$60.00 Filing Fee.}\$\$ Certified Copy (additional copy is enclosed) |
| Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations |

P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (A Florida Limited Li | ability Company) |
|--|--|
| The Articles of Organization for this Limited Liability Company v Florida document number <u>L 16000 129093</u> . | were filed on $07/07/20/6$ and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liabil | lity company here: |
| The new name must be distinguishable and contain the words "Limited Liabilit | ty Company," the designation "L.L.C." or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 1204 Lawnside Ave |
| (Principal office address MUST BE A STREET ADDRESS) | Gatety Harbor, FL 34695 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1204 Lawnside Ave Safety Harbor: FL 134695 |
| B. If amending the registered agent and/or registered office acagent and/or the new registered office address here: | ddress on our records, enter the name of the new registered |
| Name of New Registered Agent: Barb | para L. Turi |
| New Registered Office Address: / \(\sqrt{N} \sqrt{1} | Lawnside Ave Enter Florida street address |
| Sater | Finer Florida 34695 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> | Address | Type of Action |
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| | | of: (b) The 9 | 0th day after the |
| ted June 28 2021. Signature of a member or authorized representative of a member | is filed. | | |
| Signature of a member or authorized representative of a member | 7 n 2001 | | |
| Signature of a member or authorized representative of a member | $100 \times 100 $ | | |
| Signature of a member or authorized representative of a member | ted June 20 aval | | |
| 2 | Balling & True | | |
| | Barbara L. Turl Typed or printed name of signee | | |