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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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2024 JULY 17 WHH: 53

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TO:

Registration Section

| Division of Co                | rporations                                   |   |   |
|-------------------------------|--|---|---|
|                               | ue Realty, LLC                               |   |   |
| SUBJECT:                      | Name of Lir                                  | ited Liability Company  |   |
| The enclosed Articles of      | Amendment and fee(s) are sub                 | amitted for filling   |   |
|                               |  | ·   |   |
| Please return all correspo    | ondence concerning this matter               | to the following:   |   |
|                               | Vladimir F. Golik                            |   |   |
|                               |  | Name of Person  | <del></del>   |
|                               |  | Firm/Company  |   |
|                               | 5215 SW 71 Place                             |   |   |
|                               |  | Address   |   |
|                               | Miami, Florida 33155                         |   |   |
|                               |  | City/State and Zip Code   |   |
|                               | VGolikMiami@gmail.com                        | to be used for future annual report no                              | uitication)   |
| For further information c     | concerning this matter, please c             | ·   |   |
| Vladimir F, Golik             |  | 305 431-2785  |   |
| Name o                        | of Person                                    |   | me Telephone Number   |
| Enclosed is a check for the   | he 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Addres Registration S |  | Street Address:<br>Registration So                                  | ection  |
| Division of C                 |  | Division of Co  |   |

P.O. Box 6327

Tallahassee, FL 32314

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

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## TO ARTICLES OF ORGANIZATION

AKTICLES OF AMENDMENT **OF** 

|   | FICLES OF ORGANIZATION OF   | 2021 July 17 19111:                   |
|---|---|---------------------------------------|
|   | O1  | 17                                    |
| Rising Value Realty, LLC  |   | 5/1/1:                                |
| (Name of the Lim  | ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) | · · · · · · · · · · · · · · · · · · · |
| Γhe Articles of Organization for this Limited 1   | Liability Company were filed on October 25, 2016  | and assigned                          |
| Florida document number L16000196480  | ·   |                                       |
| This amendment is submitted to amend the fol  | llowing:  |                                       |
| A. If amending name, enter the new name of  | of the limited liability company here:  |                                       |
| Rising Value Properties, LLC  |   |                                       |
| The new name must be distinguishable and contain the  | words "Limited Liability Company," the designation "LLC" or                                     | the abbreviation "L.L.C."             |
| Enter new principal offices address, if appli   | cable:  |                                       |
| (Principal office address MUST BE A STREI   | <del></del>   |                                       |
|   |   |                                       |
|   |   |                                       |
|   |   |                                       |
| Enter new mailing address, if applicable:   |   |                                       |
| •   |   |                                       |
| •   | <u></u>   |                                       |
| •   | <u> </u>  |                                       |
| Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or  | registered office address on our records, enter the   | name of the new regis                 |
| (Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or   | registered office address on our records, enter the   | name of the new regis                 |
| Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or agent and/or the new registered office address                                 | registered office address on our records, enter the   | name of the new <u>regis</u>          |
| Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or  | registered office address on our records, enter the   | name of the new regis                 |
| Mailing address MAY BE A POST OFFICE  3. If amending the registered agent and/or agent and/or the new registered office address                                 | registered office address on our records, <u>enter the</u><br>ess here:                         | name of the new regis                 |
| (Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or agent and/or the new registered office address  Name of New Registered Agent: | registered office address on our records, enter the   | name of the new regis                 |
| agent and/or the new registered office addre  | registered office address on our records, <u>enter the</u><br>ess here:                         |                                       |

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

DocuSign Envelope ID: 1305E5A7-7E72-412F-8358-95ACD443D424 in amending Authorized rerson(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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| ective date if other than th   | ie date of filing:  |                   |   | (anti-                                     | onal)   |                    |
| ective date, if other than the effective date is listed, the date in this learned in this learned is effective date on the | block does not me   | et the applicable | ate of filing or mone<br>e statutory filing | e than 90 days after<br>requirements, this | filing.) Pursuant to 6<br>s date will not be li | 05.0207<br>sted as |
|  | ·                   |                   |   |  |   |                    |
| ecord specifies a delayed effect   | ive date, but not a | n effective time, | at 12:01 a.m. on                            | the earlier of: (b                         | ) The 90th day af                               | ter the            |
| s filed.   |                     |                   |   |  |   |                    |
| lune 14  |                     | 2024              |   |  |   |                    |
| lune 14  | ·                   | 2024              |   |  |   |                    |
| Docusigned by:  Vadimir Golik  |                     |                   |   |  |   |                    |
| June 14  | Signature of a me   |                   | d representative of                         | a member                                   |   |                    |

Filing Fee: \$25.00