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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL
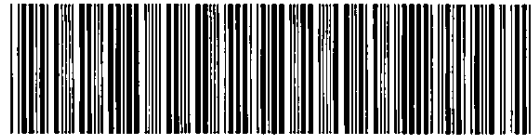
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(Business Entity Name)

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(Document Number)

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JUL 05 2017

CRIVERS

COVER LETTER

TO: **Registration Section**
         Division of Corporations

SUBJECT: _McKenzie 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:

Tashina McKenzie
                     Name of Person

McKenzie Realty LLC
                     Firm/Company

2012 SW 176th Ave
                     Address

Miramar Fl 33029
                     City/State and Zip Code

Mac OFFERS 82@gmail.com
                     E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tashina McKenzie   at (_786_) _603 - 6033._
         Name of Person   Area Code   Daytime Telephone Number

Enclosed is a check for the following amount:

☒ $25.00 Filing Fee   ☐ $30.00 Filing Fee &   ☐ $55.00 Filing Fee &   ☐ $60.00 Filing Fee,
                             Certificate of Status   Certified Copy   Certificate of Status &
                                                          (additional copy is enclosed)   Certified Copy
                                                                                   (additional copy is enclosed)

MAILING ADDRESS: **STREET/COURIER ADDRESS:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                                    Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

McKenzie Realty LLC

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

The Articles of Organization for this Limited Liability Company were filed on _01-17 2017_ and assigned
Florida document number _L17000 124 12_.

This amendment is submitted to amend the following:

A. If amending name, <u>enter the new name of the limited liability company here</u>:

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 applicable: _Tashina McKenzie_

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

<u>Name of New Registered Agent:</u>   _Tashina McKenzie_

<u>New Registered Office Address:</u>   _Same address 12082 SW 176 Ave_
                                      Enter Florida street address

Miramar , **Florida** _33029_
City   Zip Code

<u>New Registered Agent's Signature, if changing Registered Agent:</u>

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.

[signature]

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> <u>or removed from our records</u>:

MGR =   Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Tashina McKenzie	2202 SW 116th Ave Miramar Fl 33029	☑ Add ☐ Remove ☐ Change
___	___	___	☐ Add ☐ Remove ☐ Change
___	___	___	☐ Add ☐ Remove ☐ Change
___	___	___	☐ Add ☐ Remove ☐ Change
___	___	___	☐ Add ☐ Remove ☐ Change
___	___	___	☐ Add ☐ Remove ☐ Change

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

_____

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E. Effective date, if other than the date of filing: _May 17 2017_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 _May 17_ , _2017_ .

_____
Signature of a member or authorized representative of a member

Tashira McKenzie

_____
Typed or printed name of signee

Filing Fee: $25.00