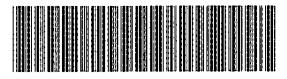
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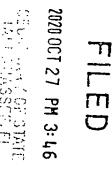
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
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Registration Section

Tallahassee, FL 32314

:O:

Division of Cor	porations				
	DPERTY MANAGEMENT, LI	.C.			
SUBJECT:	Name of Limited Liability Company				
m	A	wined for filling			
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	KERRY GOMEZ				
	Name of Person				
	Firm/Company				
	136 W PŁUMOSA LANE				
	Address				
	LAKE WORTH, FL 33467				
	City/State and Zip Code				
	GOMEZSELLSHOMES@GMAIL.COM E-mail address: (to be used for future annual report notification)				
For further information c	e-mail address: (to oncerning this matter, please ea		neauon)		
KERRY GOMEZ		561 601-6913			
Name of Person Area Code Daytime Telephone N		e Telephone Number			
Enclosed is a check for the	ne following 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 Addres		Street Address:	otion		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

K & G PROPERTY MANAGEMENT, 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 Cor	mpany were filed on $\frac{03/24/2017}{}$ and assigned
Florida document number L17000067288	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limite	d liability company here:
GOMEZ REAL ESTATE, LLC. Somez R	LEAU ESTATE : MOETBAGES, LVC. d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	<u>ss)</u>
	7.020 17.00
Enter new mailing address, if applicable:	27
(Mailing address MAY BE A POST OFFICE BOX)	Sec a U
	- 5
B. If amending the registered agent and/or registered	office address on our records, enter the name of the new register
agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with c accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docum 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.

amending Authorized Person(s) authorized to manage-enter the title, name, and address removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			☐Add
			ZZZZ Remove
			2020 CT 27 PM 3:146
			☐ Ade ☐ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remo
			□Cha

3. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (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) (optional) 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. AUGUST 1 2020 member or authorized representative of a member KERRY GOMEZ Typed or printed name of signee

Filing Fee: \$25.00