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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Section Division of Corporation		
SUBJECT: LPC	Realty LLC Name of Limited Liability Company	
The enclosed Articles of Art	nendment and fee(s) are submitted for filing.	
Please return all corresponde	ence concerning this matter to the following:	
	Cheryl Zinno	
	Firm/Company	
	2652 Tamera Ct.	
	Apopka/F1 32712	
	Apopka/F1 32712 City/State and Zip Code NZINNO 12 @ gmail. Com E-mail address: (to be used for future annual report notification)	
For further information conc	terning this matter, please call:	
Cheryl Zin	at (407) 451-4794 Area Code Daytime Telephone Number	_
Enclosed is a check for the f		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fe Certificate of Status	Status &

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2017 AVIDED
7U/: 1.
PALLAHASAY OF THE
TALLAHASSEE, FLORIDA

LPC Real	Liability Company	as it now appears on our	records.)	AHASSEE, FLOR	3: _/
(/	V Florida Limited Lia	bility Company)		7174.07	$i_{D_{x}}$
The Articles of Organization for this Limited Lia		ere filed on $\frac{5/8}{}$	<u>/n</u>	and assigned	.,,,
This amendment is submitted to amend the follow					
this amendment is submitted to amend the forlow	· mg.				
A. If amending name, enter the new name of t	the limited liabili	y company here:			
					_
The new name must be distinguishable and contain the wo	rds "Limited Liability	Company," the designation	i "LLC" or the abl	previation "L.L.C."	
Enter new principal offices address, if applical	ble:			·	_
Principal office address MUST BE .4 STREET	ADDRESS)				_
	-				_
Enter new mailing address, if applicable:	_		···		_
Mailing address MAY BE A POST OFFICE B	<u>0X)</u>				_
					_
B. If amending the registered agent and/o		e address on our re	ecords, enter	the name of the	new
registered agent and/or the new registered offi	ce address here:				
Name of New Registered Agent:		Zinno			_
New Registered Office Address:	2652 To	amera Ct. Enter Florida street	(SQ1	ne)	_
	Apopka		. Florida	32712	
	*	Cim		Tin Coda	

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.

f 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	Nathaniel Zinno		
		2652 Tamera Ct, Apopka Fl 3	Z71Z Remove
			Change
MGR	Cheryl Zinno	2652 Tanera Ct, Apopka, fi 3	Add
			Remove
			Change
			Add Red Or Self St. E. F. Change PH 3: 19
			Change T
			-
			☐ Change
			□ Add
			Remove
			Change
			Add
			Remove
			Change

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		Tall Wolf
		
		700
an effect ote: If		(optional) be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 e applicable statutory filing requirements, this date will not be listed as records.
	ord specifies a delayed effective date, b Ooth day after the record is filed.	but not an effective time, at 12:01 a.m. on the earlier of
ıted	August 9 . 20	<u>) []</u>
	May V	7.0000
	X	or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00