1/7000/02224

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TO:

Registration Section

Tallahassee, FL 32314

Divis	tion of Cor	porations					
	SIMPLISO	LD REALTY LLC					
SUBJECT: _		Name of Limi	ted Liability Company				
The enclosed .	Articles of .	Amendment and fee(s) are subt	nitted for filing.				
Please return a	all correspo	ndence concerning this matter t	o the following:				
		GREGORY J TAYLOR					
			Name of Person		-		
		SIMPLISOLD REALTY L	LC				
Firm/Company					_		
3395 VANDERBILT DR							
Address					-		
WELLINGTON, FL 33414							
		GJTAYLOR@COMCAST.	City/State and Zip Code NET		- 20	17	
		E-mail address: (t	o be used for future annual report notification)		ي انو	-
For further inf	formation c	oncerning this matter, please ca	II:			126	FILED
GREG TAYL	.OR		561 908-3516 at ()			_	
	Name o	f Person	Area Code Daytime Telep	none Number		1:31	
Enclosed is a	check for th	ne following amount:					
\$25,00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Sta	tus &	
	Registr Divisio	ING ADDRESS: ration Section on of Corporations ox 6327	STREET/COURIER AI Registration Section Division of Corporations Clifton Building	ODRESS:			

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIMPLISOLD REALTY LLC	
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number L17000102224	ompany were filed on 05/08/2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
he new name must be distinguishable and contain the words "Limit	ited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRI	<u>ESS)</u>
	
Inter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered agent and/or the new registered office address.	
	26 ET
Name of New Registered Agent:	2 0 m

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	GREGORY J TAYLOR	3395 VANDERBILT DR	
		WELLINGTON, FI. 33414	∭ Remove
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fective date, if other than th	e date of filing	n·		(option:	d)	
an effective date is listed, the date m	ust be specific and	l cannot be prior to date	of filing or more than	90 days after fili	ng.) Pursuant t	605.020
ote: If the date inserted in this b			tatutory filing requi	rements, this da	ite will not be	: listed as
ocument's effective date on the l	Department of S	state's records.				
record specifies a delaye	ed effective o	date, but not an	effective time,	at 12:01 a.m	n. on the e	arlier o
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	Signature of a r	member or authorized	representative of a me	ember		Γ-
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