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COVER LETTER

TO:	Registration Se Division of Cor			
CUBIC		OUSE CONTRACTORS REAL	LTY L.L.C.	
SUBJE	CI:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub		
		Beatriz Torres		
			Name of Person	
		PACER HOUSE CONTRA	ACTORS REALTY L.L.C.	
			Firm/Company	
		3801 Kimball ave		
			Address	
		Tampa, FL 33614		
			City/State and Zip Code	
		beatriztorresrealty@yahoo.o		
		E-mail address: (to be used for future annual report noti	fication)
For furt	ther information c	oncerning this matter, please c	all:	
Beatriz	Torres		682 554-5601 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclose	ed is a check for th	ne following amount:		
□ \$2:	5.00 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	is:	Street Address:	

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

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

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PACER HOUSE CONTRACTOR	S REALTY L.L.C.
(Name of the Lim	ited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
	Liability Company were filed on 07/14/2017 and assigned
This amendment is submitted to amend the fol	lowing:
A. If amending name, enter the new name of	of the limited liability company here:
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 STRE	ET ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE	BOX)
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our records, enter the name of the new registered ess here:
Name of New Registered Agent:	Isabel Reed
New Registered Office Address:	3801 Kimball ave
	Enter Florida street address

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

Tampa

If 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BEATRIZ TORRES	3801 Kimball ave	□Adđ
		Tampa, FL 34654	Remove
			☐ Change
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			□Remove
			☐ Change
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Effective date, if other than the offer an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the Defeated.	ck does not meet the appli	cable statutory filing	(optional) fre than 90 days after filing.) requirements, this date v	Pursuant to 605,0207 vill not be listed as
record specifies a delayed effective	date, but not an effective	time, at 12:01 a.m. o	n the earlier of: (b) The	90th day after the
rd is fi led .				
	2022	···		
March 2 Dated		BAHAM		
rd is filed. March 2 Dated	Signature of a member or aut	BAHAM	of a member	

Filing Fee: \$25.00