L18000001175

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COVER LETTER

Div	ision of Corp	orations	,		
SHR IFOT.	Browning R	ealty Services, LLC			
SUBJECT.		Name of Limit	ted Liability Company		
The enclosed	l Articles of A	mendment and fee(s) are subn	nitted for filing.		
Please return	all correspon	dence concerning this matter to	o the following:		
		Seth Browning			
			Name of Person		=
		Browning Realty Services,	LLC		
			Firm/Company		-
		175 2nd St S, Unit P-17			
			Address	 ,	-
		St. Petersburg, FL 33701			
		· ·-	City/State and Zip Code		-
		seth@rkmdev.com			
		E-mail address: (to	o be used for future annual r	eport notification)	
For further in	nformation co	ncerning this matter, please ca	11:		
Seth Browning			at ()	-()2()9	
	Name of	Person	Area Code	Daytime Telephone Numbe	r
Enclosed is a	a check for the	e following amount:			
■ \$25.00 T	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certified osed) Certified	ate of Status &

Mailing Address: Registration Section Division of Corporations

Registration Section

TO:

P.O. Box 6327 Tallahassee, FL 32314

Street Address: 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 OF

Browning Realty Services, LLC							
		ny as it now appears on our re nability Company)	cords.)				
The Articles of Organization for this Limited Liab Florida document number <u>L18000001175</u>	oility Company	were filed on January 2, 20	18	and ass	igned		
This amendment is submitted to amend the follow	ving:						
A. If amending name, enter the new name of t	<u>he limited liab</u>	ility company here:					
The new name must be distinguishable and contain the wor	ds "Limited Liabil	lity Company," the designation	'LLC'' or the :	abbreviation "L	L.C."	_	
Enter new principal offices address, if applicat	ble:	175 2nd St S					
(Principal office address MUST BE A STREET		Unit P-17				_	
		St. Petersburg, FL 33701				_	
Enter new mailing address, if applicable:	175 2nd St S						
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	Unit P-17					
		St. Petersburg, FL 33701				_	
B. If amending the registered agent and/or regagent and/or the new registered office address Name of New Registered Agent:		address on our records, <u>e</u>	nter the na	me of the new	w regiss	tere	
New Registered Office Address:	175 2nd St S, U			ASI	-Z		
		Enter Florida street a	ddress	me me	7	Ì	
	St. Petersburg		Florida 📑	3701	₹ X	. [- 7	
New Registered Agent's Signature, if changing Re	egistered <u>Agent:</u>	City		200 Sink	e e	`	
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the re	r and complete ered agent as j	performance of my dutie provided for in Chapter 6	s, and I am 605, F.S. Oi	r familiar wi r. if this doci	th and iment i		

company has been notified in writing of this change.

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

or removed from our records:		
MGR = Manager AMBR = Authorized Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□ Add
			□ Remove
			□Change
-			
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2. Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	ust be specific a block does not	nd cannot be prior meet the applic	able statutory fi	r more than 90 day: ling requirement	s, this date wi	ursuant to 6 Il not be li	05.0207 (sted as t	[3](l the
the record specifies a delayed effect cord is filed.	ive date, but no	ot an effective ti	me, at 12:01 a.r	n. on the earlier	of: (b) The S	00th day af	ier the	
Dated		2023	<u> </u>					
	Signature of	a member or autho	orized representat	ive of a member				

Filing Fee: \$25.00