## 48000103131

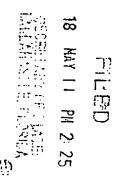
(Requestor's Name)	
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PICK-UP WAIT MA	IL
(Business Entity Name)	
(Document Number)	
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O SIMMONS

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Statewide Real Entate	Invisionants  invas it now appears on our records.)  Liability Company)		
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on April 24, 2018 and assigned		
Florida document number <u>L.18000103131</u> .	, ,		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "LLC."		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	953 <b>6</b>		
	夏里		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	35 29		
	25 25 25 25		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her			
<del>-</del>	_		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	Florida		
	City Zip Code		

## 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.

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	Jamalli Wilson	20530 NW 20 Avenue	⊠ Add
		Miami Gardens, FL 33056	□ Remove
			Change
			Add
			Remove
			Change
	<del></del>		🗆 Add
			Remove  Remove  Add
		<u>dir</u>	Add  25  Remove
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anciong any o	ther information, enter change(s) he	The process of the second seco	cens. y necessary.y
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an effective date is list of the date instants.	ther than the date of filing:ted. the date must be specific and cannot be prerted in this block does not meet the appet date on the Department of State's record	licable statutory filing requir	(optional) 90 days after filing.) Pursuant to 605.020 rements, this date will not be listed as
	es a delayed effective date, but r ofter the record is filed.	not an effective time, a	at 12:01 a.m. on the earlier o
ated	May 8	<u>018</u> .	
	1 all A Nil		
	Signature of a member or au	ithorized representative of a me	mber

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