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COVER LETTER

TO:

Registration Section
Division of Corporations

Tallahassee, FL 32314

Flowery Ro	ealty & Management, LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Address: Street Address: Registration Section n of Corporations Division of Corporations		
	MacKinley Justin		
		Name of Person	
	Flowery Realty & Manage	ement, LLC	
		Firm/Company	
	1111 Oakfield Dr. #115D		
		Address	
	Brandon, FL 33511		
	<u>. </u>	City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information of	oncerning this matter, please c	all:	
Mack Justin		305 457-2969	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Address			
-			
P.O. Box 632			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Flowery Realty & Management, LLC

2020 J''' -6 PM 5: 43

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Con Florida document number L18000139936	mpany were filed on June	e 6, 2018 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company her	<u>e</u> :
Justin Florida Realty, LLC		
The new name must be distinguishable and contain the words "Limited	d Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1111 Oakfield D	rive, #115D
(Principal office address MUST BE A STREET ADDRE.	Brandon, FL 335	11
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	P.O. BOX 1384 Brandon, FL 335 office address on our re-	
Name of New Registered Agent:		
New Registered Office Address: 1111 Oal	kfield Drive #115D Enter Floria	la street address
Brandon		Florida 33511
	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.

or removed	from our records:	1	
MGR = M AMBR = A	lanager Authorized Member	NIA	
<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
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			Change
	· · · · · · · · · · · · · · · · · · ·		⊡Add
			□Add
		<u></u>	□Remove
			Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

		
		
		
		
		
		
· · · · · · · · · · · · · · · · · · ·		 -
	1/2/2020	
Effective date, if other than the	date of filing: (optional) t be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant	to 605.0207 (
Note: If the date inserted in this blo	ock does not meet the applicable statutory filing requirements, this date will not b	
document's effective date on the De	epartment of State's records.	
e record specifies a delayed effective rd is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day	y after the
Dated	2020	
	Mack Justin	
	Mack NStr	
	Signature of a member or authorized representative of a member	
MacKinley Justin		
-	Typed or printed name of signee	

Filing Fee: \$25.00