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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

Division of Corp	porations		
SURTECT: (REIODIS) Real Estate Investing	Options	
30b3EC1. (= = + + + =		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing	
		-	
Please return all correspoi	ndence concerning this matter	to the following:	
	Samuel Hendry		
		Name of Person	
	(REIOpts) Real Esta	te Investina Options	
	((10,0pto) (100) 20ta	Firm/Company	
	11523 Palmbrush Tr		·
		Address	
	Lakewood Ranch FL 342	202	
		City/State and Zip Code	
	samhendry1@yahoo.com	1	
	E-mail address: (t	o be used for future annual report notific	ration)
For further information co	oncerning this matter, please ca	dl:	
Samuel Hendry		941, 229-	- 0262
Name of	Person	at (941) 229- Area Code Daytime	Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 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 ADDRESS:

TO: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ed Liability Compa (A Florida Limited)	any as it now appea	ars on our records.)				
ability Company	were filed on _	JULY 06, 2018 and assigned				
		Harris D				
owing:		5. 16				
the limited liab	ility company h	ere:				
ords "Limited Liabi	ility Company," the	designation "LLC" or the abbreviation "L.L.C."				
able:	1152	3 Palmbrush Trail				
T ADDRESS)	StE_	158				
	Lakeu	rood Ranch FL 34202				
	3030 N. Ro	cky Point Dr.				
Mailing address MAY BE A POST OFFICE BOX)		STE 150A				
	Tampa FL	33607				
		n our records, enter the name of the nev				
<u>Tice address her</u>	<u>.</u> e:					
5						
Registere	a Agents In	C				
3030 N. R	Rocky Point	Dr. STE 150A				
	Enter Flo	orida street address				
Tampa		, Florida 33607				
	City	Zip Code				
	owing: f the limited liab ords "Limited Liab able: T ADDRESS) for registered of the address her Registere 3030 N. F	ed Liability Company as it now appear (A Florida Limited Liability Company) ability Company were filed on owing: f the limited liability company has been solved above. TADDRESS) STE Lakeiv 3030 N. Ro STE 150A Tampa FL: Registered office address of fice address here: Registered Agents In 3030 N. Rocky Point Enter Florida Liability Company." the solved above.				

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 reing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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
AMBR	Samuel Hendry	11523 Palmbrush Tol STE 158, LWR, FO	_342 23 Add
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ective date, if other than the date of filing: n effective date is listed, the date must be specific and cate: If the date inserted in this block does not mecument's effective date on the Department of Sta	annot be pri set the appl	ior to date of licable statt				filing.) P	
record specifies a delayed effective da 'he 90th day after the record is filed.	ite, but r	not an eff	ective tii	ne, at	12:01 a	a.m. or	the earlier
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$\frac{5EP}{10}$.	201	<u>8</u> .					
Ainmel 9 Signature of a me	4/2	Da					
Signature of a me	ember or au	thorized rep	resentative o	f a memb	per		
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Page 3 of 3

Filing Fee: \$25.00