

L18000200216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

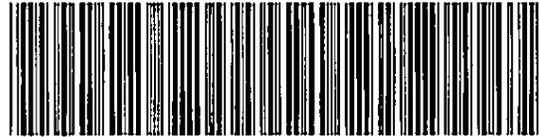
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FALLS CHURCH, VA

PRICE  
OCT 03 2021



**PEREIRA LAW, P.C.**

1822 North Main Street, Suite 203, Fall River Massachusetts 02720

508 675-1188

FAX 508 675-1189

STEVEN R. PEREIRA  
ALLYSON A. PEREIRA

September 9, 2021

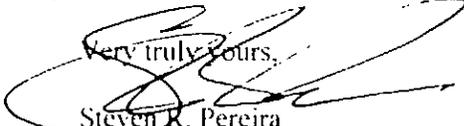
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Pobzeznik Realty, LLC**  
**Articles of Amendment to Articles of Organization**

Dear Sir or Madam:

Enclosed pursuant to the above-noted Limited Liability Company, please find Articles of Amendment to Articles of Organization, together with my check in the sum of \$25, payable to the Florida Department of State, representing the filing fee for same. At your earliest convenience, please file and process same accordingly. Should you have any questions, please feel free to contact me.

I thank you for your time and anticipated cooperation in this regard.

Very truly yours,  
  
Steven R. Pereira

2021 SEP 24 PM 5:11  
RECEIVED  
TALLAHASSEE

SRP  
Enc.  
cc: Pobzeznik Realty



**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Pobzeznik Realty, LLC

(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 Company were filed on August 20, 2018 and assigned Florida document number 1.18000200216.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name 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 applicable: \_\_\_\_\_

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Barbara M. Pobzeznik

New Registered Office Address:

same

*Enter Florida street address*

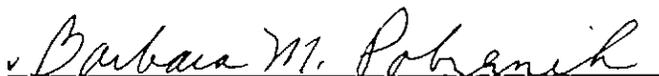
Florida

*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.*

  
Barbara M. Pobzeznik  
If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Thomas W. Pobzeznik	2600 S.E. Ocean Boulevard M-15	<input type="checkbox"/> Add
		Stuart, FL 34996	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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 SECTION 1  
 TALLAHASSEE COUNTY

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