L18000234887

Office Use Only



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2022 JUL -5 PH 4: 36 SECRETAGE STATE

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COVER LETTER

	gistration Se vision of Cor				
SUBJECT:	Real Estate	Solutions Team FL LLC			
SUBJECT		Name of Lim	ited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		Angel Pabon			
			Name of Person		
		Real Estate Solutions Team	n FL LLC		
			Firm/Company		
		600 Rinehart Road, Suite 2	2038. Lake Mary, FL 32746.		
		 -	Address		
		600 Rinehart Road, Suite 2	2038		
			City/State and Zip Code		
		Lake Mary, FL 32746			
		E-mail address: (to be used for future annual report not	tification)	
For further in	nformation co	oncerning this matter, please co	all:		
Angel Pabor	1		414 759-5486 at ()		
	Name of	f Person	Area Code Daytir	me Telephone Number	
Enclosed is a	a check for th	ne following amount:			
■ \$25.00 F	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)	
	iling Addres		Street Address: Registration Se	ection	
Division of Corporations			Division of Corporations		
	D. Box 632		The Centre of		
Rep Div P.C	gistration S vision of C	<u>s:</u> Section orporations 7	(additional copy is enclosed) Street Address: Registration Se Division of Co The Centre of	Certified Copy (additional copy is a ection proporations	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Real Estate Solutions Team FL LLC

(Name of the Limited Lia (A Flo.	bility Company as it now a	appears on our records.) PH 4: 36
The Articles of Organization for this Limited Liability Florida document number 1.18000234887	y Company were filed o	on 10/03/2018 F.P. SEE, F.L. and assigned
This amendment is submitted to amend the following	:	
A. If amending name, <u>enter the new name of the l</u>	imited liability compa	<u>ny here</u> :
The new name must be distinguishable and contain the words "I	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 AD	DRESS)	
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address here		our records, <u>enter the name of the new registe</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Ente	er Florida street address
	<u> </u>	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>	Name	Address	Type of Action
AMBR	VAZQUEZ, JOHNPAUL	600 RINEHART RD SUITESUITE 2038	= Add
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Γ. 65	06/01/2022
Note:	ive date, if other than the date of filing:
the reco	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
	06/01/2022
Dated	
	Signature of a member or authorized representative of a member

Typed or printed name of signee