## 118000279780

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(В	usiness Entity Name)
(De	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVESTORS MLS LLC	
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were for florida document number L18000279780	iled on DECEMBER 5, 2018 and assigned
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	mpany here:
he new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS <sub>!</sub>	
<u> </u>	
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
	!
3. If amending the registered agent and/or registered office address	s on our records, <u>enter the name of the new regis</u>
gent and/or the new registered office address here:	 ယှ
	. 64
Name of New Registered Agent:	<u> </u>
N D istant d Office Address.	
New Registered Office Address:	Enter Florida street address
	, Florida
	Zin 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	FRANK M. FORNACA	3636 OLD SPANISH TRAIL, B1-5	□ Add
		HOUSTON, TX 77021	<b>≅</b> Remove
			□Change
AMBR	AMBR KELLI BIGLANE	7 LAZY HOLW	■Add
		WILDWOOD, FL 34785	□Remove
			□ Change
			□Add
			Remove
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			Change
			🗖 Add
			□Remove
			□Change

	<del></del>
	JUNE 16, 2022
Effect	ive date, if other than the date of filing: (optional) [ective date is listed, the date must 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 block does not meet the applicable statutory filing requirements, this date will not be listed as
docun	nent's effective date on the Department of State's records.
he reco: ord is fi	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
ora is i	
15	JUNE 16 2022
Dated	
	Maluel 5/s/a
	Signature of a member or authorized representative of a member
	•
	MICHAEL S. BIGLANE

Filing Fee: \$25.00