## 1190000 36468

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

	egistration Scivision of Cor			
SHD IEZT		OOD REAL ESTATE LLC		
SUBJECT		Name of Lin	ited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		MACK YOUNG		
			Name of Person	
		BREEZEWOOD REAL E	STATE LLC	
			Firm/Company	
		1324 NE 26TH AVENUE		
			Address	·- <u>·</u>
		FORT LAUDERDALE, F	1, 33304	
			City/State and Zip Code	
		MACKYOUNG85@GMAI	L.COM	
		E-mail address; (	to be used for future annual report notifi	ication)
For further	information c	oncerning this matter, please c	att:	
маск ус	DUNG		954 309-3059 at ( )	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	ca check for th	ne following amount:		
<b>■</b> \$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)
R	lailing Addres	Section	Street Address: Registration Sec	
	ivision of C .O. Box 632	orporations	Division of Corp The Centre of Ta	
	allahassee,			: Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BREEZEWOOD REAL ESTATE LLC

( <u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C		and assigned
Florida document number [1.19000036468	<u></u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	<u>RESS)</u>	
		020 FE
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
		<u></u>
B. If amending the registered agent and/or registere	d office address on our records, enter the r	ame of the new registered
agent and/or the new registered office address here:	a vince and ess on var records, <u>enter the r</u>	: O
Name of New Registered Agent:		<del>,</del>
New Registered Office Address:		
	Enter Florida street address	
	Florida	l
	City	Zip Code
New Registered Agent's Signature, if changing Registere	<del></del>	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the register company has been notified in writing of this change.	complete performance of my duties, and 1 of egent as provided for in Chapter 605, F.S. ed office address, 1 hereby confirm that the	im familiar with and Or, if this document is

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	KIMBERLY PAIGE BLAND	1324 NE 26TH AVENUE, FORT LAUDERDALE, I	
			_ □Remove
			_
			□Add
			_ 🗆 Remove
			_ Change
			_ □Add
			_ □Remove
			_ Change
			_ 🗆 Add
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Filing Fee: \$25.00