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### **COVER LETTER**

TO: Registration S Division of Co			,	
	al Estate Appraisal Group, LLC	·		
SUBJECT:				
	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	oondence concerning this matter	to the following:		
	Gail M Pitcher			
		Name of Person		
	GMP Real Estate Apprais	al Group, LLC		
		Firm/Company	· · · · · · · · · · · · · · · · · · ·	
	1900 Sunset Harbour Dri	ve #1211		20
		Address		" 24
	Miami Beach FL 33139		-	_ <b>Ξ</b> = ˈ
		City/State and Zip Code	• :	12 PM
	305gailp@gmail.com			<u> </u>
		to be used for future annual report noti	fication)	2: \ 33
	concerning this matter, please c			ω
Gail Pitcher		305 934-0180		
Name	of Person	at () Area Code Daytim	e Telephone Number	_
Enclosed is a check for	the 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 Certificate of Certified Cop (additional copy	Status &
Mailing Addr		Street Address:	·	
Registration Division of		Registration Se Division of Cor		
Division of Corporations P.O. Box 6327		The Centre of T	-	
Tallahassee, FL 32314		2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GMP Real Estate Appraisal Group, LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) liability Company)	
The Articles of Organization for this Limited Liability Company  L19000173472  Location for this Limited Liability Company	were filed on July 3, 2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Gail Maureen Pitcher LLC		207
The new name must be distinguishable and contain the words "Limited Liability	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1900 Sunset Harbour Drive #1211	
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33139	N 1
		<u> </u>
Enter new mailing address, if applicable:	NA	2: 33
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:	address on our records, enter the n	ame of the new regist
	, Florida	
<del></del>	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 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
			□Add
			□Remove
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June 3, 2024

### E. Effective date, if other than the date of filing: \_\_\_\_\_\_\_(optional) (If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

	June 3, 2024
Dated	
	Jane A- Fitter
	Signature of a member or authorized representative of a member
	Gail/M Pitcher
	Typed or printed name of signee