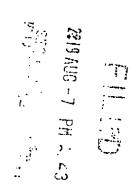
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## **COVER LETTER**

TO: Registration S Division of Co			
Sail to Solo SUBJECT:	d LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	`Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Lauren Hendrickson		
	Sail to Sold LLC	Name of Person	
	2270 6th Avenue N	Firm/Company	
	Saint Petersburg, FL 3371	Address 3	
	Lauren Ose	City/State and Zip Code  Ai L Sol D. Com  To be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
Lauren Hendrickson		727 999-0525 at ()	
Name o	of Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for the	he 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sail to Sold Realty LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appears on our record nited Liability Company)	<u>ls.</u> )
The Articles of Organization for this Limited Liability Com	pany were filed on 07-15-2019	and assigned
Torida document number L19000182002		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
he 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:	<del></del>	
Principal office address MUST BE A STREET ADDRES	<u> </u>	
Inter new mailing address, if applicable:	PO BOX 12023	3. 30
Mailing address MAY BE A POST OFFICE BOX)	St.Petersburg, FL 33730	· = !!
		24 -O
If amending the registered agent and/or registere egistered agent and/or the new registered office address		·
	<u> </u>	of C
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres.	s .
	Flo	orida
	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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Lauren Hendrickson	2270 6th Avenue N Saint Petersburg, FL 33713	<b>=</b> Add
		Remove AMBR and Add Lauren as MGR	
			☐ Change
AMBR	Lauren Hendrickson	2270 6th Avenue N Saint Petersburg, FL 33713	□ Add
			■ Remove
			Change
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<u>iote:</u> If the	ate, if other than the dat date is listed, the date must be date inserted in this block effective date on the Depar	does not meet the ap	plicable statutory fil	(optional more than 90 days after filinging requirements, this date	) g.) Pursuant to 605.020' e will not be listed as
e record The 90tl	specifies a delayed ef n day after the record	fective date, but is filed.	not an effective	e time, at 12:01 a.m.	on the earlier o
08/05	;	2019			
ated	<del>,</del>	,	·		
		nature of a member or a			
_	Stor	JOHNSON AT A MICHANIST AF A	unnarized representati	ue of a member	
-	J. <u></u>	A	autionzeu representati	hurson	