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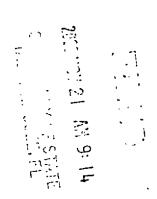
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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

ΓO:

A GARCIA	NREALTY LLC	
	Name of Lim	ited Liability Company
he enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.
lease return all correspo	ondence concerning this matter	to the following:
	ARELIS GARCIA	
	-	Name of Person
	A GARCIA REALTY LL	С
		Firm/Company
	\$201 PETERS ROAD #10	000
	<u></u>	Address
	PLANTATION, FL 33324	4
		City/State and Zip Code
	AGARCIAREALTY@GM	
or further information c	e-mail address: (concerning this matter, please co	to be used for future annual report notification) all:
ARELIS GARCIA		all: 954 288-7420 at ()
Name o	f Person	Area Code Daytime Telephone Number
inclosed is a check for t	he following amount:	
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed)
Mailing Address Registration 1 Division of C	Section Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A GARCIA REALTY LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on JULY 17, 2019 and assigned Florida document number <u>L1900</u>0184007 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new regist agent and/or the new registered office address here: $\{\dot{}\}$ Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cuv

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	JOSE A. GARCIA	8201 PETERS ROAD #1000	□ Add
		PLANTATION FL 33324	■Remove
			☐ Change
			
			□Remove
			□Change
			□Add
	_		□ Remove
			Change
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			☐Change

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Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this block does not meet the applicable statutory filing requir document's effective date on the Department of State's records.	(optional) 90 days after filing.) Pursuant to 605.0207 (. rements, this date will not be listed as th
ne record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the eord is filed.	arlier of: (b) The 90th day after the
Dated November 15 2023	
Dated November 15 2003. Signature of a member or authorized representative of a member of	mber