

L19000316763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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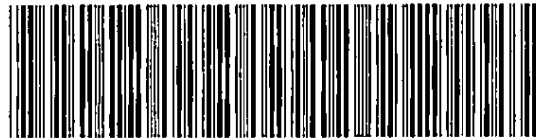
(Business Entity Name)

(Document Number)

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DEC 21 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3 in 1 REAL Estate Investors LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Raymond Kennard
Name of Person

3 in 1 Solutions LLC
Firm/Company

5937 Raleigh St, #5106
Address

Orlando, FL 32835
City/State and Zip Code

3in1solutions2@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Raymond Kennard at (407) 657-6866
Name of Person Area Code Daytime 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 Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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**

3 in 1 Real Estate Investors LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2022 DEC 21 AM 9:03

The Articles of Organization for this Limited Liability Company were filed on 08/26/2019 and assigned
Florida document number L19000216763

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

3 in 1 Solutions LLC

The 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:

(Principal office address MUST BE A STREET ADDRESS)

~~15701 SR 50, Suite 204 NE~~
Clermont, FL 34711
1230 OAKLEY SEAVEN DR, STE 101

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

~~15701 SR 50, Suite 204 NE~~
Clermont, FL 34711
1230 OAKLEY SEAVEN DR, STE 101

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

~~15701 SR 50, Suite 204 NE~~ 1230 OAKLEY
Enter Florida street address SEAVEN DR, STE 101
Clermont, Florida 34711
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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

(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)

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.

Raymond Kemp
Signature of a member or authorized representative of a member

Raymond Kennard
Typed or printed name of signer

Filing Fee: \$25.00