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| (Requestor's Name) |
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| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| SHRIF | C CONT | | | | | | | |
| 30131.0 | <u> </u> | Name of Lin | ited Liability Company | - | | | | |
| The encl | osed Articles of | Amendment and fee(s) are sub | omitted for filing. | | | | | |
| Pleasere | eturn all correspo | ondence concerning this matter | to the following: | | | | | |
| | | Daniel Jittu | | | | | | |
| | | | Name of Person | | | | | |
| | | 27 STATE REALTY LLC | | | | | | |
| | | | Firm/Company | | | | | |
| | Division of Corporations 27 STATE REALTY LLC Name of Limited Liability Company the enclosed Articles of Amendment and fee(s) are submitted for filing. ease return all correspondence concerning this matter to the following: Daniel Jittu | | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | Address | | | | | |
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| | tication) | | | | | | | |
| For furth | ner information c | | | | | | | |
| Daniel J | ittu | | | | | | | |
| | Name o | f Person | Area Code Daytim | e Telephone Number | | | | |
| Enclosed | l is a check for th | ne following amount: | | | | | | |
| ■ \$25. | 00 Filing Fee | | Certified Copy | Certificate of Status & | | | | |
| | Mailing Addres Registration S | | <u>Street Address:</u> Registration Sco | ction | | | | |
| | District of C | | registration 30 | CHOH . | | | | |

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

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

27 STATE 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 _____ and assigned Florida document number _____19000217260 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 "L.L.C." 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 register agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida _

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.

City

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 |
|--------------|----------------------|-----------------------|----------------|
| AMBR | Sallie Colaco Wagner | 6222 Ikes Cabin Court | |
| | | Palmetto, FL 34221 | □Remove |
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| <u>ite:</u> If the | date inserted in | dan the date of it date must be specifing this block does in the Department | not meet the ap | plicable statuto | ng or more than 9 ry filing require | (optional) 0 days after filing ments, this date | .) Pursuant to 605. will not be liste | 020 :d a |
| ecord specis filed. | cifies a delayed | effective date, bu | t not an effectiv | ve timę, at 12:0 | I a.m. on the ea | rlier of: (b) Ti | ne 90th day after | the |
| Octob | ber 31 | | 2022 | | | | | |
| ted | | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | - · | · | | | | |
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| _ | | Signature | of a member or a | uthorized represe | entative of a mem | ber | | |

Filing Fee: \$25.00