L19000234660

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Melanie Pitts Realto, 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:
Melanie Pitts
Name of Person
Firm/Company
1574 Country Walk Dr.
Planing Island, FL 32003 Gid/State and Zip Code
Melanie Pitts & CBVFL, (Tom F-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Melanie Pitts at (904) 655-2224 Name of Person Area Code Daytime Telephone Number
Name of Person Mea Code Phaydine Person Name of Per
Enclosed is a check for the following amount:
Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

Melanie Frtts Lea (Name of the Limited Liability Compar (A Florida Limited L.	ny as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000334660</u> .	were filed on <u>9-17-20</u>	19 and assigned
This amendment is submitted to amend the following:	·	
A. If amending name, enter the new name of the limited liabi Melanie Pi++5; LLC		
The new name must be distinguishable and contain the words. Limited Liabili	ity 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)	NA	2020 O
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	CI 27 PM 3: 88
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	
Name of New Registered Agent: New Registered Office Address:	N/A Enter Florida street address	
	, Florida	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

MGR = Manager

AMBR = Authorized Member

or removed from our records:

Title	<u>Name</u>		Address	ı	Type of Action
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					□Remove
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Effective date, if oth	der than the date of filing: d, the date must be specific and cannot be prior to date of filing or red in this block does not meet the applicable statutory filidate on the Department of State's records.	(optional) more than 90 days after filing.) Pursuant to 6 ing requirements, this date will not be li	05.0207 (3 sted as th
Note: If the date inser			
Note: If the date inser document's effective d	layed effective date, but not an effective time, at 12:01 a.m	i. on the earlier of: (b) The 90th day af	ter the
Note: If the date inser document's effective of the record specifies a del	layed effective date, but not an effective time, at 12:01 a.m. $\frac{23-2020}{}$	i. on the earlier of: (b) The 90th day af	ter the
Note: If the date inser document's effective of the record specifies a delord is filed.	layed effective date, but not an effective time, at 12:01 a.m. 3-200 Mulanul Horizon representative Signature of a member or authorizon representative.		ter the

D.

Filing Fee: \$25.00