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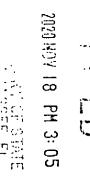
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COVER LETTER

Registration Section

TO:

Div	ision of Cor	porations			
EUDIECT.	Timothy R	Schmidt LLC			
SUBJECT:		Name of Lin	ited Liability Company		
The enclase	l Articles of	Amendment and fee(s) are sub	contend the filting		
THE CHCIOSEC	i Aideles ut	extilendment and fee(s) are suc	imuca for thing.		
Please return	all correspo	ondence concerning this matter	to the following:		
		Heather C Wylie			
			Name of Person		
		Wylie & Associates LLC			
			Firm/Company		
		1601 Park Center Drive, S	te 6A		
			Address		
		Orlando, FL 32835			
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
		heather@wylieassoc.com			
			to be used for future annual report not	ification)	
For further in	iformation c	oncerning this matter, please c	all:		
Heather C. V	-		407 298-4646 at ()		
	Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a	check for th	ne following amount:			
□ \$25 00 F	iling 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 fadditional copy is enclosed)	
	ling Addres		Street Address:	voti au	
		orporations		Registration Section Division of Corporations	
P.O). Box 632	7	The Centre of		
Tal	lahassee, F	FL 32314	2415 N. Monro	be Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Timothy R Schmidt 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 11/12/2019 and assigned Florida document number 1.19000281222 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RightHouse Realty, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation 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 registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _____. Florida ___ Cin

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 or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			F-Add
			□Remove
			□ Change
			Remove
			CS C P T CS
			ZAdd
			□Remove
			(JChange
		· · · · · · · · · · · · · · · · · · ·	□Remove
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fective date, if other than the n effective date is listed, the date muster: It the date inserted in this blocument's effective date on the D	st be specific and cannot be pitor to date of filing or more lock does not meet the applicable statutory filing i	(optional) te than 90 days after filing.) Pursuant to 605.0207 requirements, this date will not be listed as
ecord specifies a delayed effective	ve date, but not an effective time, at 12:01 a.m. on	the earlier of: (b) The 90th day after the
is filed. November 12	2020	
is filed. November 12	2020 Signature of a member or authorized representative of	

Filing Fee: \$25.00