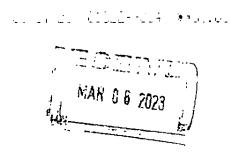


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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
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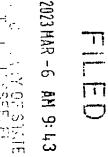




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## **COVER LETTER**

	ealty, LLC					
CI:	Name of Limit	ted Liability Company				
losed Articles of	Amendment and fee(s) are subr	nitted for filing.				
eturn all correspo	ndence concerning this matter t	o the following:				
	Kelly Robert					
		Name of Person				
		Firm/Company	<u></u>			
	3333 NW 53rd Terrace	Addraws				
	Gainesville, FL 32606	Addies				
	kelly@kellyrobertrealtor.co	City/State and Zip Code  ni to be used for future annual report noti	tication)			
her information c						
tobert		352 222-1744				
Name o	f Person	Area Code Daytim	e Telephone Number			
d is a check for t	he following amount:					
i.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
		<u>Street Address:</u> Registration Sc	ection			
Division of C	Corporations	Division of Co	Division of Corporations The Centre of Tallahassee			
	her information of cobert  Name of the control of the cobert of the cobe	Name of Limit  losed Articles of Amendment and fee(s) are subreturn all correspondence concerning this matter to Kelly Robert    Kelly Robert	Name of Limited Liability Company			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

K Robert Realty, LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	any were filed on November 13, 2019	and assigned
Florida document number 1.19000283066		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited	liability company here:	
Celly Robert, LLC		
he new name must be distinguishable and contain the words "Limited I	iability Company," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	5)	23
· · · · · ·	-	7 A -
		6 AM 9
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		΄ 📈 ω
. If amending the registered agent and/or registered off gent and/or the new registered office address here:	ice address on our records, <u>enter the r</u>	name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	l
	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

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
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Note:	tive date, if other fective date is listed. If the date inser- ment's effective d	ted in this block	does not m	eet the applic	cable statutory	y or more than 90 filing require	(optiona ) days after fili ments, this da	al) ng.) Pursuant to 60 tte will not be li	05.0207 sted as
record d is fil	rd specifies a dela iled.	ayed effective da	te, but not	an effective t	ime, at 12:01	a.m. on the ear	lier of: (b)	The 90th day af	ier the
	March 2	<del></del>	,	202.3					
Dated .									
Dated :	Y_	about							
Dated .		Relevit Sign	nature of a n	nember or auth	orized represen	tative of a mem	ber		

Filing Fee: \$25.00