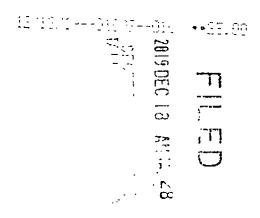
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PICK-UP	☐ WAIT	MAIL
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ertified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

Registration Section Division of Corporations

BJECT:	SANDY TOE	S REALTY, PLLC			
Ducer.	· ·	Name of Limi	ted Liability Company		
e enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.		
ase return:	all correspond	dence concerning this matter	to the following:		
		JAROSLAW KARBOWSI	ΚI		
			Name of Person		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·	
		455 ALT 19 S #120			
			Address	-	
		PALM HARBOR, FLORII	DA 34683		
			City/State and Zip Code	e	
		JAREKARTOFTHEFLIP@			
		E-mail address: (to be used for future annua	l report notification)	
r further ir	formation con	eerning this matter, please co	ill:		
ROSLAW	/ KARBOWS	KI	480 20 at ()_	06.4041	
	Name of F	Person	Area Code	Daytime Telepho	one Number
closed is a	check for the	following amount:			
≣ \$25.00 F	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is ea		\$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

SANDY T	TOFS.	REAL	TY	PL:	LC
JANILI .	LVLJ	17 17 7 1	, , , ,		

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 2 Articles of Organization for this Limited Liability Company were filed on November 18, 2019 and assigned L19000286653 rida document number is amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: ROSLAW GRZEGORZ KARBOWSKI, PLLC new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." iter new principal offices address, if applicable: rincipal office address MUST BE A STREET ADDRESS) iter new mailing address, if applicable: *Stailing address MAY BE A POST OFFICE BOX* If amending the registered agent and/or registered office address on our records, enter the name of the new registered ent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

ew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and except the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is sing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability ompany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

mending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added emoved from our records:

R = Manager

IBR = Authorized Member

<u>le</u>	<u>Name</u>	Address	Type of Action
iR	DANIELLE L KARBOWSKI	455 ALT 19 S #120	
		PALM HARBOR, FL 34683	≣Remove
			Change
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			□ Remove
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			Remove
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IAROSLAW KARBOWSKI		Signature of a member or authorized representative of a member

Filing Fee: \$25.00