L19000287620

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	·
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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COVER LETTER

Division of	f Corporations
Reel	Estate Rescue, LLC
30b3ECT	Name of Limited Liability Company
The enclosed Article	es of Amendment and fee(s) are submitted for filing.
Please return all con	respondence concerning this matter to the following:
	Joseph R. Young
	Name of Person
	Reel Estate Rescue, LLC
	Firm/Company
	12475 Santee St.
	Address
	Spring Hill, Florida 34609
	City/State and Zip Code
	joerescueshomes@gmail.com E-mail address: (to be used for future annual report notification)
For further informati	ion concerning this matter, please call:
Joe Young	321 287-4290 at ()
Na	me of Person Area Code Daytime Telephone Number
Enclosed is a check t	for the following amount:
□ \$25.00 Filing Fe	ce S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

TO: Registration Section

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 TORROWN ON TORROWN OF TORROWN OR

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Reel Estate Rescue, LLC	
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L19000287620	y were filed on November 19, 2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liab	ility 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 agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
-	Enter Florida street address
	77 0 A 4

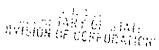
New Registered Agent's Signature, if changing Registered Agent:

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 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 21 MAR 31 PM 12: 1	Type of Action
MGR	Barbara A. Young	12475 Santee St., Spring Hill, Fl. 34609	
			Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			Remove
			□Change
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ctive date, if other to effective date is listed, the : If the date inserted iment's effective date	e date must be specific in this block does n	c and cannot be protot meet the app	licable statutor	g or more than 90 c y filing requireme	_ (optional) ays after filing.) Pursents, this date will	suant to 605.02 not be listed
ord specifies a delayed filed.	d effective date, but	not an effective	e time, at 12:01	a.m. on the earlie	er of: (b) The 90t	h day after th
d MARCH	Z9 th	_, <u>ZoZ</u>	<u>_</u> .			
Josep	h R. Yor Signature o	of a member or au	thorized represer	ntative of a member	·	•
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