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COVER LETTER

Division of Corp	orations		
SUBJECT:	die Lynn Bre Name of Limi	ingan Real Esta ted Libility Company	ale uc
The enclosed Articles of A	mendment and fee(s) are sub-	nitted for filing.	
Please return all correspon	dence concerning this matter (to the following:	
	<u>Jodie</u>	Lynn Brunga Name of Person	<u> </u>
	17744 AS	Nky Dr Unit A	
	Panama Ci	Address Note of the Second Fl 324 City/State and Zip Code	
	jodie brein	of of the used for future annual report noti	fication)
For further information co	ncerning this matter, please ca		
Jodie Lynn B Name of	Person J	at (850) 896 Area Code Daytim	5738 Telephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing 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 (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

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

Jodie L Breiman Real	Estate, LC
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 84-4598406	were filed on 13, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	
Jodie Lynn Breingan Lic	lity Company," the designation "LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words "Limited Liabil	lity 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)	1575 Indian Woman Rd Sanja Rosa Beach Fl 32459
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1595 Indian Woman Rd Sunta Rosa Beach Fl 32459
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	产级 整
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	₩ 2
	Enter Florida street address U
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre	ee 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
			□Remove
			□Change
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