

L20 000095416

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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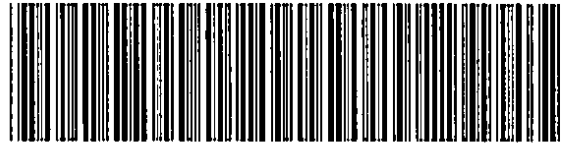
(Business Entity Name)

(Document Number)

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2021 JAN -4 AM 8:21

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 03A Realty LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rafael M. Ojeda
Name of Person

03A Realty
Firm/Company

239 Citrus St Ste A
Address

Pensacola, FL 32506
City/State and Zip Code

riojeda@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rafael Ojeda at (910) 489-2003
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

03A Realty 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 April 2, 2020 and assigned
Florida document number C200000095416.

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This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

239 Citrus St
Ste A
Pensacola, FL 32506

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

239 Citrus St
Ste A
Pensacola, FL 32506

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

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AP	Ernesto Ojeda	3511 Ocean Cir	<input type="checkbox"/> Add
		Unit C	<input checked="" type="checkbox"/> Remove
		Mar La Jolla, KS 66503	<input type="checkbox"/> Change
AMBR	Leida Almodovar	3511 Ocean Cir	<input type="checkbox"/> Add
		Unit C	<input checked="" type="checkbox"/> Remove
		Mar La Jolla, KS 66503	<input type="checkbox"/> Change
			2021 JAN - 4
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			APR 8
			<input type="checkbox"/> Change
			2021
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 22 December, 2020

Rafael M. Ojeda

Filing Fee: \$25.00