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| (Re | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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TO:

| TO: Registration Se Division of Cor | | | |
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| Realtor Hal SUBJECT: | * Humaker H. Heley | Homoker Realton L | LC |
| 30bJEC1. | Name of Lim | ited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing | |
| | ndence concerning this matter | - | |
| | Haley Hamaker | | |
| | | Name of Person | |
| | | Firm/Company | |
| | 6608 Ski In | | |
| | | Address | |
| | Milton, Florida 32583 | City/State and Zip Code | |
| | | City/State and Zip Code | |
| For further information c | E-mail address: (oncerning this matter, please c | to be used for future annual report nall: | orification) |
| haley hamaker | | 850 8303220 at () | |
| Name o | f Person | | ime Telephone Number |
| Enclosed is a check for the | ne 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: Registration Section | | Street Address: Registration S | Section |
| Division of Corporations | | Division of Corporations | |
| P.O. Box 6327 | | The Centre of Tallahassee | |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Realtor Haley Hamaker LLC | _ | | |
|--|--|-----------------------|----------|
| (Name of the Limited Liability Co. (A Florida Limi | mpany as it now appears on our records.) ted Liability Company) | _ | |
| The Articles of Organization for this Limited Liability Comp. | any were filed on 07/10/2020 | and assigned | ed |
| Florida document number $\frac{1.20000199103}{1.20000199103}$. | | | |
| his amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited l | liabil <u>ity company here</u> : | | |
| Haley Hamaker LLC | | | |
| The new name must be distinguishable and contain the words "Limited L | iability 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 | <u> </u> | | |
| | | _ | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| Mailing address MAY BE A POST OFFICE BOX) | | | |
| | | | |
| | | | |
| If amending the registered agent and/or registered offigent and/or the new registered office address here: | ice address on our records, <u>enter the n</u> | ame of the new reg | giste |
| | | 202 5 | |
| Name of New Registered Agent: | | 7022 001 SESSE | 11 |
| New Registered Office Address: | | T3 T | pa ** |
| | Enter Florida street address | 177 F | |
| | , Florida | AH E | <u> </u> |
| | City | Size Colls | |

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.

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

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|-------------|----------------|----------------|
| | | | □Add |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 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. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated Scpt 19 Signature of a member or authorized representative of a member Haley Hamaker Typed or printed name of signee