## LZD 000ZZ1456

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DEC 1 7 2020 S. YOUNG



## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor			
SUBJECT: HOY	ne Choice r	Realty Solut	ions LLC
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Woodly J	ACQUES Name of Person	
		Firm/Company	
		Address	
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report not	ification)
For further information of	concerning this matter, please co	all:	
Wood I Name of	acques of Person	at ( <u>407</u> ) <u>024</u> Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Addre Registration Division of C P.O. Box 633	Section Corporations	Street Address: Registration Se Division of Co The Centre of	rporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C	) <sup>1</sup> 22
(A Florida Limited	Solutions  Any as it now appears on our records.)  Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L200022145</u> 4	were filed on $07/27/2020$ 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:
WBJ Property Solutions The new name must be distinguishable and contain the words "Limited Liabi	LLC 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)	7208 W. SandLake Rd Ovlando, FL 32819 Ste #305
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	7208 W Sand Lake Rd Orlando, FL 32819 Ste #305
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
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>	Address	Type of Action
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			□Remove
	<del></del>	□Change	
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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note:	ve date, if other than the date of filing:  (optional)  ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the record ecord is fil	I 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 ed.
Dated	October 15 , 2020.
	Signature of a member or authorized representative of a member
	Woodly Jacques Typed or printed name of signee

Filing Fee: \$25.00