L20000241411

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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Sec Division of Corp			
	EALTY LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
	SHARON NIMMO		
		Name of Person	
		Firm/Company	·
	90 NE 131st STREET		
		Address	
	NORTH MIAMI, FL 3316		
	sharonnimmo@gmail.com E-mail address: (City/State and Zip Code to be used for future annual report notif	ication)
For further information co	oncerning this matter, please co	all:	
Sharon	Nimmo	at (954) 257 C	(535
Name of	rerson	Area Code Daytimo	e Telephone Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fec	☐ \$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 S		<u>Street Address:</u> Registration Sec	rtion
Division of Co		Division of Cor	
P.O. Box 6323		The Centre of T	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SHANIM REALTY LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
he Articles of Organization for this Limited Liability Company	were filed on 8/10/2020	and assigned
lorida document number L2000024[41]		
nis amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liabi	lity company here:	
HARON NIMMO LLC		
e new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o	
nter new principal offices address, if applicable:		2021 AF
rincipal office address MUST BE A STREET ADDRESS)		7 71
		S2 2
		M s M
nter new mailing address, if applicable:		
Aailing address MAY BE A POST OFFICE BOX)		연변 2
		7.
If amending the registered agent and/or registered office a	ddress on our records, <u>enter th</u>	e name of the new registe
ent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Flori	ida
	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			☐Change
			□Add
			□ Remove
			Remove Remove Remove Remove Remove Remove Change
			□ □Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
	.		□Add
			Remove
			□Change

Effective date, if other than the date of filing: (optional) (are effective 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 605.00 feet; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed focument's effective date on the Department of State's records. Precord 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 distribution of a member of a member.							
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	· -	effective date, but no	ot an effective ti	ime, at 12:01 a.m	on the earlier of	f: (b) The 90t	h day after th
Signature of a member or authorized representative of a member		3/71	<u>. </u>				
	ated 123						

Filing Fee: \$25.00