L21000008835

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COVER LETTER

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T/O: Registration S Division of Co			
	ER REALTY LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	PAMELA YUTZY		
		Name of Person	
	YUTZY'S BUSINESS SO	LUTIONS INC	
	<u> </u>	Firm/Company	
	1569 SHADOW RIDGE O	CIR	20 0
		Address	
	SARASOTA FL 34240		FB2
	PAMELAY28@COMCAS	City/State and Zip Code T.NET	B22-PH 3:
	E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please c	all:	
PAMELA YUTZY		941 378-4171 at ()	
Name	of Person	Area Code Daytime Telephor	ne Number
Enclosed is a check for	the following amount:		
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration		Street Address: Registration Section	,
_	Corporations	Division of Corporation	ns
P.O. Box 63	27	The Centre of Tallahass	see
Tallahassee,	FL 32314	2415 N. Monroe Street, Tallahassee, FL 32303	Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NIC YODER REALTY LLC	
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)
The Articles of Organization for this Limited Liability Compan Florida document number $\frac{L21000008835}{L21000008835}$	ny were filed on DECEMBER 30, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
NIC YODER LLC	
The new name must be distinguishable and contain the words "Limited Liab	bility 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)	
	721 Z
Enter new mailing address, if applicable:	No. 22 page
	95 D [1]
(Mailing address MAY BE A POST OFFICE BOX)	m _c o [m]
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, enter the name of the new register
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	<u>t:</u>
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of my duties, and I am familiar with and sprovided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

or remove	ng Authorized Person(s) authorized to nd from our records:	, <u> </u>	
MGR = 3	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			☐ Change
			DRemove
			Change
			TEB 22
			CTC) TO Remove
			Change
			🗖 Add
			□Remove
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Effective date, if other that (If an effective date is listed, the date)	the date of e must be speci	filing: fic and cannot be p	rior to date of fili	ng or more than	(optio 90 days after	nal) filing.) Pursuan	t to 605.0201
<u>Note:</u> If the date inserted in t document's effective date on				ry filing requi	rements, this	date will not	be listed as
ne record specifies a delayed ef ord is filed.	fective date, bi	ut not an effectiv	e time, at 12:0	l a.m. on the	rarlier of: (b)	The 90th da	ay after the
FEBRUARY 16		2021					
Dated FEBRUARY 16			·				
	∠)	Λ	uthorized represe				1