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## **COVER LETTER**

TO:

Registration Section

Division of Corporations Emment Realty, LLC SUBJECT: 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: Sylvia Jie Xu Name of Person Emment Realty, LLC Firm/Company 3949 nighthawk Dr. Address Weston, FL 33331 City State and Zip Code sylviajxiealtor(a gmail.com F-mail address; (to be used for future annual report notification) For further information concerning this matter, please call: Sylvia Jie Xu Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filling Fee □ \$30.00 Filling Fee & □ \$55.00 Filing Fee & □ \$60,00 Filing Fee. Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed). Certified Cepy- (additional copy is enclosed) Certified Cepy-Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations ထ္ P.O. Box 6327 The Centre of Tallahassee S Tallahassee, FL 32314 2415 N. Monroe Street, Suite 8‡θ Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Eminent Realty, LLC				
( <u>Name of the Limited Liability Company as</u> (A Florida Limited Liabil	it now appears on o ty Company)	ur records.)		
The Articles of Organization for this Limited Liability Company were	•	7/2021	and assi	gned
Florida document numberL21000019606				
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 Co	ompany," the designa	tion "HC" or the	: abbreviation **1.1	.c· "
Enter new principal offices address, if applicable:	<u>-</u>			
(Principal office address MUST BE A STREET ADDRESS)				
			· -·	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				-
				<i>a</i> .
B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:	ess on our record	ls, <u>enter the na</u>		reg <b>iss</b> ere
agent and we have been extracted and the second			1021	~·!~{
Name of New Registered Agent:			AR AR	i [
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New Registered Office Address:	Enter Florida str	eet address	5. 5	_[]_
	TONCE THO AND ME		· D	
	City	, Florida ˌ	2 - Zip ( <b>55</b> -	
	•			

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
President	Sylvia Jie Xu	3949 nighthawk Dr. Weston FL 33334	■Add
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ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) filed.	1 106 30m op.	after t
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Filing Fee: \$25,00

Typed or printed name of signee