## L21000028061

(Requ	iestor's Name)	
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(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	ne)
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Certified Copies	Certificates	of Status
Special Instructions to Fil	ina Officer:	

Office Use Only



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## COVER LETTER

FO: Registration Se Division of Cor			
ESTATE A	ND EFFECTS LLC		
<del></del>	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	Gordon Arana		
		Name of Person	
	ESTATE AND EFFECTS	LLC	
		Firm/Company	
	5263 Cresthaven Blvd Apt	D	
		Address	
	West Palm Beach, FL 334	15	
		City/State and Zip Code	
	idas 1899@outlook.com E-mail address: (	to be used for future annual report notif	fication)
For further information c	oncerning this matter, please ca		
Gordon Arana		561 369-5075 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ESTATE AND EFFECTS LLC	
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	ars on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{0}{2}$ Florida document number $\frac{121000028061}{1000028061}$ .	01/12/2021 and assigned
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liability company l	<u>here</u> :
Estate & Asset Downsizing Buyers LLC	
he new name must be distinguishable and contain the words "Limited Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	175.
Principal office address MUST BE A STREET ADDRESS)	AR 2
	55.0
inter new mailing address, if applicable:	AH 8: 27
Mailing address MAY BE A POST OFFICE BOX)	Om <b>N</b>
3. If amending the registered agent and/or registered office address on our gent and/or the new registered office address here:  Name of New Registered Agent:	records, enter the name of the new registe
Common of From Registerior Fragmin.	
New Registered Office Address:	
Enter Fl	orida street address
	Florida

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.

City

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Remove
			□Change
	<del></del>		□Add
			□Remove
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			22 Cadd
			C C C Bormove
			RO 22 □Change
			□Add
			Remove
			□Change
		<b>-</b>	□ Add
			□ Remove
	<del></del>		□Add

Effective date, if other than the date of filing:  (optional)  (in a 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 605.0207 Note; if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The effective date is a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the rd is filed.  March 16th  Signature of a member or authorized representative of a member.							
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Filing Fee: \$25.00