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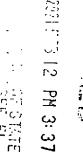


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## **COVER LETTER**

Division of Co			
SUBJECT:	Jim Brockett R	EAL ESTATE, LLC	
	Name of Limit	ted Liability Company	
The enclosed Articles of	f Amendment and fee(s) are subr	nitted for filing.	
Please return all corresp	ondence concerning this matter t	o the following:	
	<u> Willia</u>	M J BROCKE TT Name of Person	
	Jim B	NOCKET REAL ESTA	TE LLC
	3701 G	tew Ay Dr. Address	, <u>-</u>
	TALLAHAS	City/State and Zip Code  were a Commercial Code  o be used for future annual report no	υ9
	Jima	reckett@gmaic.c	i den
	E-mail address: (t	o be used for future annual report n	otification)
For further information	concerning this matter, please ca	dl:	
Jim	Brockett of Person	ar 850 459	.4585
Name	of Person	Area Code Dayt	ime Telephone Number
Parland Paradonal Com	ale 6.11 min a consent		
Enclosed is a check for	•		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & 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

The Articles of Organization for this Limited Liability Company were filed on Jan. 25th 2021 and assigned Florida document number L 21 0000 45 14 1.  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  Jim Brackett LLC.  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here:	Jim Brodged	Real ESTATE (and as it now appears on our records.)	LLC
Florida document number L 21 0000 45 14 1  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:    J_M Brocket LLC	(Name of the Limited Liability Comp (A Florida Limited	anv as it now appears on our records.) Liability Company)	
A. If amending name, enter the new name of the limited liability company here:    J_M Brocket LLC		y were filed on Jan. 75th	ZOZI and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here:	This amendment is submitted to amend the following:		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here:			or the abbreviation "L.L.C."
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here:	Enter new principal offices address, if applicable:		
Maine of New Registered Agent:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here:	(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
Name of New Registered Agent:			202
Name of New Registered Agent:		address on our records, enter th	70 PO
New Registered Office Address:	Name of New Registered Agent:		
Enter Florida street address	New Registered Office Address:	Enter Florida street address	
, Florida		Flor	rida
City Zip Code	·		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. Thereby 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
			□Change
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				. 12.21		
ecord sp is filed.	ecities a delayed	effective date, but n	iot an effective tit	me, at 12:01 a.m. (	on the earlier of: (b)	) The 90th day after t
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ted	teB. 17	2, 2021		·		
		Signature of	a member or autho	orized representative	of a member	
			4 ~ J. Typed or printe			
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