L21000099375

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
(61)/612122-1-1112-1-1
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900362417519

03/23/21--01022--014 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Soint-Haire Real Estete Solutions LLC. 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:
Mario R. Saint-Hilaire Jr. Name of Person
Saint-Hilaire Real Estate Solutions LLC.
9300 Conray Windermere Rd. # 1004
City/State and Zip Code City/State and Zip Code City/State and Zip Code Cobert Q Scinthicipe solutions. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mario R. Saint-Hilaire Jr. at (407) 758-2705 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30,00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee. Certificate of Status 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 Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Saint - Haire Real Estat (Name of the Limited Liability Compan (A Florida Limited Li	e Solutions LLC. y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company velocida document number <u>L 21000089375</u> .	were filed on FEbruary 23 Zueland assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty 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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new registered
New Registered Office Address:	Enter Florida street address
<u></u>	City Florida Zip Sale

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.

New Registered Agent's Signature, if changing 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
AP	Mario 2.	Saint-Hilaire Jr.	4300 Convay Windermere Rd. # 1004 Windermere FL 34786	□ Add
				XRemove
				Change
	Mario 72	Sount-1tilcine Jr.	9300 Conroy Windermere Pd. #1004 Windermere FL 34786	□ Add
				□Remove
				Change
mgp	Mario R.	Sount-House Jr.	9300 Conray Windermere Rd. #1004 Windermere FL. 34756	XAdd
				□ Remove
				□Change
			40//	□ Add?
				Remove
				□ Change
				D
 				□ Add
				□Remove
				□Change
				□ Add
				Петоче
				Change

When	I Cre	ated the	E LLC,	Iacc	iden!	tally
made my	iself a	"AP" au	id I ne	ed it t	D (E	<u>cd'</u>
When made my that I	am the	"Presiden	nt or Du	oner" of	- the	WC
					<u></u>	
				<u> </u>		<u> </u>
						_
				<u></u>		
				· ·		
					<u>.</u> : .	21
						21 M
					- ;	AR 23
	han the date of fi	ling:	1.1 .ccl	(optio		
ctive date, if other th				: uran 90 days anda	ning) Lm	not be his
effective date is listed, the e: If the date inserted is	date must be specific n this block does no	ot meet the applicabl	le statutory filing	equirements, this	s date wilf	
effective date is listed, the e: If the date inserted is	date must be specific n this block does no	ot meet the applicabl	le statutory filing	equirements, this	date will	<u>.</u>
effective date is listed, the te: If the date inserted is ument's effective date of cord specifies a delayed	date must be specific in this block does no on the Department o	ot meet the applicabl of State's records.	le statutory filing	equirements, this		:
effective date is listed, the te: If the date inserted is ument's effective date of cord specifies a delayed s filed.	date must be specific in this block does not the Department of the Department of the defective date, but	ot meet the applicabl of State's records.	le statutory filing	equirements, this		•
ective date, if other the effective date is listed, the term of the date inserted in turnent's effective date of the coord specifies a delayed is filed. The date in the date inserted in the date of	date must be specific in this block does not the Department of the Department of the defective date, but	ot meet the applicabl of State's records.	le statutory filing i	equirements, this		-