## L21000107593

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	rsiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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03/21/22--01015--022 \*\*55.00

2022 MAR 21 PM 4: 24
SEGRETABLE OF STATE
TALLAHASSEF

A. BUTLER APR 04 2022

## **COVER LETTER**

TQ:

TQ: Registration Sec Division of Corp			
SUBJECT: SAÉ	z Realty S	Pervices LLC	
	Name of Lin	nited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspor	dence concerning this matter	to the following:	
		T 0	
		Tose Saez	
		Name of Person	<del>.</del> .
	Saez	- Realty Service Firm/Company	cel/CC
		Firm/Company	
		Excalibur Ct.	
		Address	
	Octun	1. El 32872	
		Lo, FL 32827 City/State and Zip Code	<del></del>
	team	n Saezhomes 69 gan to be used for future annual report notif	ail.com
	E-mail address: (	to be used for future annual report notif	fication)
For further information co	ncerning this matter, please c	all:	
Jose Sa	Pz.	407, 405-	2.320
Name of	<del></del>	at (407) 405 - Area Code Daytime	e Telephone Number
Enclosed is a check for the	e following amount:		
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>
			(additional copy is diffused)
Mailing Address	1	Street Address:	
Registration S		Registration Sec	
Division of Co	•	Division of Cor	•
P.O. Box 6327 Tallahassee F		The Centre of T	allahassee - Street Suite 810
1 4422811811	1 3/314	24 I 3 IN IVIORIO	s succer since all

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

Saez R	ealtw	Services	2022 HAR 21	PM 4: 24
(Name of the Limited	Liability Comp Florida Limited	any as it now appear Liability Company)	rs om our records.)	<del>OF STATE</del> SEE, FL
The Articles of Organization for this Limited Liab	oility Company 7893	y were filed on	03/05/202	2_/ and assigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the COSE Saez The new name must be distinguishable and contain the word	110			the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	<del> </del>		
(Principal office address MUST BE A STREET)	<u>ADDRESS)</u>		<del>_</del>	
		<u> </u>		
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BO	<u>2X)</u>			
B. If amending the registered agent and/or reg agent and/or the new registered office address l		address on our r	ecords, <u>enter the</u>	name of the new registered
Name of New Registered Agent:				
New Registered Office Address:		Enter Flor	rida street address	
			, Florid	a
		City	, 1 10110	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. 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
	<del></del>		□Add
			□ Remove
		<del></del>	□Change
<del>.</del>			□Add
			□Remove
			□Change
		⊡Add	
			□ Петюче
		□Change	
		□Add	
		□Remove	
		□Change	
		□Add	
		□Remove	
			□Change
		□Add	
			□Remove
			□Change

If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
<del></del>	
-	<del></del>
If an effect Note: If	e date, if other than the date of filing:  (optional)  ive 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 (3)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the t's effective date on the Department of State's records.
e record s rd is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	March 11th 2022
	7 d 8 -
	Signature of a member or authorized representative of a member
	Jose Saez
	Typed or printed name of signee