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## **COVER LETTER**

Registration Section
Division of Corporations

TO:

	EAL ESTATE, LLC				
SUBJECT:	Name of Lim	ited Liability Company	<del> </del>		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Deborah L. Sheffield				
		Name of Person			
		Firm/Company			
	3040 NE 35th Street		- S - S - S - S - S - S - S - S - S - S	2021 APR 26	
		Address			
	Ocała, FL 34479				
		City/State and Zip Code		= <u>₹</u> .	
	dsheff.realtor@gmail.com		コブ	PH 4: 50	
	E-mail address: (	to be used for future annual report not	ification)	50	
For further information c	oncerning this matter, please c	all:			
Deborah L. Sheffield		305 942-1189 at ()		_	
Name o	f Person	Area Code Daytir	ne Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fe Certificate of S Certified Copy (additional copy is	tatus &	
Mailing Addres		<u>Street Address:</u> Registration Se	ection		
Division of C	Corporations	Division of Corporations			
P.O. Box 632		The Centre of			
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DSHEFF REAL ESTATE, LLC		· <del></del>
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on April 7, 2021	_ and assigned
Florida document number L21000162575		•
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Deborah Sheffield, LLC		
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	ن باتا:	2021
	Haral Haral	<del>2</del> 77
	2.2	~ <del>,,,,,,,</del>
		o 1
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	Crico	
		<u></u>
	in.	0
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the name o</u>	of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	Zin 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 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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fective date, if other than th	e date of filing: ust be specific and cannot be prior to date	(o)	ptional)
ote: If the date inserted in this b	block does not meet the applicable sta	or ning or more than 90 days a atutory filing requirements,	this date will not be listed
cument's effective date on the I	Department of State's records.		
ecord specifies a delayed effecti	ive date, but not an effective time, at	12:01 a.m. on the earlier of	(b) The 90th day after
is filed.	· · · · · · · · · · · · · · · · · · ·		(4,
April 20	2021		
ited	. 2021		