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COVER LETTER

	Registration Sc Division of Cor					
		PROPERTY HOLDINGS LL				
SUBJEC	.T:	Name of Limited Liability Company				
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		DOUGLAS KAMEH				
			Name of Person		,	
BUSINESS CONTROL SERVICE, INC.						
			Firm/Company			
3925 S NOVA RD STE 1						
			Address		•	
PORT ORANGE, FL 32127						
		DOUG@BUSINESSCONT				
		E-mail address: (to be used for future annu	al report notification)		
For furth	er information c	oncerning this matter, please c	all:			
DOUGL.	AS KAMEH		386 7	7605454	(1)	
Name of Person		Area Code	Daytime Telephone Number			
Enclosed	is a check for th	ne following amount:			ESY 2	
■ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fe Certified Copy (additional copy is e	Certifica enclosed) Certified	te of Status &	
Mailing Address: Registration Section			Address: tration Section			
Division of Corporations			Divis			
P.O. Box 6327 Tallahassee, FL				Centre of Tallahassec N. Monroe Street, Suite 8	10	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORTESE PROPERTY HOLDIN			
(Name of the Lim	ited Liability Company as it i (A Florida Limited Liability)	now appears on our records.) Company)	
The Articles of Organization for this Limited I		led on 05/05/2021	and assigned
Florida document number 1.21000210611	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability co	mpany here:	
he new name must be distinguishable and contain the	words "Limited Liability Comp	pany," the designation "LLC" or th	ne abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	<u> </u>		
-			
 If amending the registered agent and/or gent and/or the new registered office addr 		on our records, <u>enter the r</u>	name of the new regis
			<u> </u>
Name of New Registered Agent:	PETER SARTORETTI		<u></u>
New Registered Office Address:	735 BAY TREE CT		
		Enter Florida street address	32123 = Zip Code
	PORT ORANGE	, Florida	32123
	Ciņ	ı .	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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	PETER SARTORETTI	735 BAY TREE CT	
		PORT ORANGE, FL 32127	□Remove
			≘ Change
MGRM	FRANK SARTORETTI	6221 TORTOISE CREEK LN	
		PORT ORANGE, FL 32128	□Remove
			≡ Change
			□Add
		•	☐ Change
			D Change 22 □ □ Add
			□Remove
			□Change
			□Add
			□Remove
			Chango

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) V E. Effective date, if other than the date of filing: ______ (optional) _____ (If an 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated MAY 24TH 2021 Signature of a member or authorized representative of a member PETER SARTORETTI Typed or printed name of signee