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(Business Entity Name)
(Document Number)
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TO:	Registration Section Division of Corpo						
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For furth	er information conc	erning this					
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□ \$25.	00 Filing Fee !		Filing Fee & cate of Status	Ce	.00 Filing Fee tified Copy litional copy is en		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

	ce hear est		
(<u>Name of the Limited L</u> (A.F	iability Company as it now appe lorida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liabil Florida document number	· · · -	5-13-21	and assigned
his amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	limited liability company l	<u>here</u> :	
Price Prope	erty services,	UC.	11 / / / / / / / / / / / / / / / / / /
The new name must be distinguishable and contain the words		designation "LEC" or the	abbreviation "L.L.C.
Enter new principal offices address, if applicable Principal office address MUST BE A STREET A			
Inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX	<u> </u>	·	·
B. If amending the registered agent and/or regis agent and/or the new registered office address he		records, <u>enter the na</u>	me of the new regist
Name of New Registered Agent:			:
New Registered Office Address:			
	Enter Flo	orida street address	
_	Cin·	, Florida _	Zip Code
	Çilî,		in come

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>	Name	Address	Type of Action
			□ Add
			□Remove
			Change
			□Remove
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i effective dat te: If the da	e is listed, the da te inserted in t	ite must be specific his block does r	e and cannot be pr	or to date of filing licable statutory ds.	or more than 90 d	lays after filing.) Pı	irsuant to 605,020' I not be listed as
cord specifi	es a delayed ef	fective date, but	not an effective	e time, at 12:01 a	.m. on the earli	er of: (b) The 9	0th day after the
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