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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ROBERT D. ROYSTON, JR., P.A.

Account Number : I20150000047 Phone : (239)205-2225 : (239)205-2016 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

rroyston@rroystonlaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CRE COMMERCIAL LLC

Certificate of Status	0
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T. LEMIEUX Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

CRE Commercial LLC		
(<u>Name of the Limited Liability (</u> (A Florida Lii	Company as it now appears on our re- mited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Com- Florida document number <u>L21000229294</u> .	npany were filed on 05/20/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	I Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
	<u> </u>	021/NOV
Enter new mailing address, if applicable:		pen
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>en</u>	⊸ i ∽
Name of New Registered Agent:	<u>.</u>	
New Registered Office Address:		
	Enter Florida street ad	ldress
		. Florida
	Сиу	Zip Code
New Registered Agent's Signature, if changing Registered A	· ·	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	plete performance of my duties it as provided for in Chapter 60	s, and I am familiar with and 05, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

· nm·	Dah	Royston	
-rom:	RUU	ROYSIUI	

Fax: +12392052225

≜ Ta.

Fax: +18506176383

Page: 3 of 4

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mercer Investment Properties, Inc.		
			Remove
MGR	Randal Lewis Mercer	16465 Rainbow Meadows Court	■Add
		Fort Myers, FL 33908	Remove
			□Change
			□Add
			□ Remove
			☐ Change
	· · · · · · · · · · · · · · · · · · ·		□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			Remove
			□Change

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D. If amending any other in	formation, enter change(s) here: (Attach additional sheets, if necessary.)	
		.
		
		
		
Note: If the date inserted in	the date of filing:	ant to 605.0207 (3)(of be listed as the
f the record specifies a delayed c ecord is filed.	ffective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th	day after the
Dated November 14		
Kau	Signature of a member or authorized representative of a member	
Randal Lewis M		
	Typed or printed name of signee	

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Filing Fee: \$25.00