## L21000 229604

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## COVER LETTER

TO: Registration So Division of Cor		•			
Corporate SUBJECT:	Realty Associates				
	Name of Lim	nited Liability Company	<del></del>		
	Amendment and fee(s) are subundence concerning this matter				
	Gerard P. Hill				
	<u> </u>	Name of Person			
	Corporate Realty Associat	cs, LLC			
		Firm/Company			
	2395 Chesaco Road				
		Address	<del>* • • • • • • • • • • • • • • • • • • •</del>		
	Brooksville, Florida 34603	2		2021 JUN 1 SEGRETAI	2177
	gph@cra.company	City/State and Zip Code		JN 15	Traca Junia É
	E-mail address: (	to be used for future annual report noti	fication)	57 15 15 15 15 15 15 15 15 15 15 15 15 15	1 9
For further information of	concerning this matter, please c	all:		္ႏွင့္ တာ	
Gerard P. Hill		352- 895-7575		년 5	
Name c	of Person	at () Area Code Daytime	e Telephone Number		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	
Mailing Addres	<b>85:</b>	Street Address:			

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

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	OF	TAIL T	
Corporate Realty Associates			اعف
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on onted Liability Company)	our records.)	3
The Articles of Organization for this Limited Liability Comp			
Florida document number L21000 229 607	`		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
Corporate Realty Asssociates, LLC			
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	· <del>-</del> ·····		
(Principal office address MUST BE A STREET ADDRESS	<u>s)</u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our record	ls, enter the name of the new registere	<u>d</u>
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida st.	'eet address	
	City	, Florida Zw Code	
	0,	zy cone	

## 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
MGR	Gerard P. Hill	2395 Chesaco Road	□Add
		Brooksville, Florida 34602	■Remove
			□Change
MGR	Brian Brockman	11427 Recd Hartman Hwy, Suite 236	<b>=</b> Add
		Cicinnati, Ohio 34602	□ Remove
			□Change
AMBR	Gerard P. Hill	2395 Chesaco Road	Add
		Brooksville, Florida 34602	□ Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			Remove
		<del></del>	□Change
			□Add
			□Remove
			□Change

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is filed.	ord specifies a delayed effective date. but not a	i effective time, at 12:01 a	.m. on the earlier of: (b)	The 90th day after th
sted June 15 2021	filed.			
	filed.	2021		
Signature of a member or authorized representative of a member	filed.	2021		

Filing Fee: \$25.00