人21000234575

(Re	questor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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A. RIVERS



500375832475

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BUILD 2 RENT DIRECT LLC				
(<u>Name of the Limited</u> (A	Liability Compa Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liab lorida document number L21000234575		were filed on 05/20/2021 and assigned		
his amendment is submitted to amend the follow				
. If amending name, enter the new name of the	he limited liab	pility company here:		
the state of the s	1. 01 (The Court of the state of the s		
he new name must be distinguishable and contain the words "Limited Liabi		7988 VIA DELLAGIO WAY		
nter new principal offices address, if applicable:	SUITE 206			
Principal office address MUST BE A STREET ADDRESS)		ORLANDO, FL 32819		
nter new mailing address, if applicable:				
Aailing address MAY BE A POST OFFICE BOX)				
. If amending the registered agent and/or reg gent and/or the new registered office address		address on our records, enter the name of the new registe		
Name of New Registered Agent:	WAGNER NOLASCO			
New Registered Office Address:	16300 COUNT	CY ROAD 455 APT 516		
		Enter Florida strect address 25		
	MONTVERDE	34756s ==		

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.

City

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	SCHOLZ, FREDERICK	16300 COUNTY ROAD 455 APT 516	□ Add
		MONTVERDE, FL 34756	≣Remove
			□Change
MGR	NOLASCO, WAGNER	16300 COUNTY ROAD 455 APT 516	■ Add
		MONTVERDE, FL 34756	□Remove
			□Change
			□ Add
			□Remove
			□Change
		-	□Add
		·	□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change

				
				
				
				
				
			- ,	
factive date if other than the	date of filing:		(optional)	
fective date, if other than the n effective date is listed, the date must be: If the date inserted in this blooment's effective date on the D	ock does not meet the applic	cable statutory filing r	e than 90 days after filing) Pursua requirements, this date will no	ant to 605,0207 of be listed as
ecord specifies a delayed effectiv	e date, but not an effective (time, at 12:01 a.m. on	the earlier of: (b) The 90th	day after the
is filed.				
OCTOBER 27	2021			
OCTOBER 27	2021			
is filed. Ited OCTOBER 27	Signature of a member or auti	CO P nortzed representative of	l'a member	

Filing Fee: \$25.00