L21000234706

(Requestor's Name)					
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COVER LETTER

	Registration Se Division of Cor				
SUBJEC	ABA Realt	y, LLC			
JOBALA,					
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ret	urn all correspo	ondence concerning this matter	to the following:		
		Alex Adams			
			Name of Person		
496 Misty Oaks Run		Firm/Company			
		496 Misty Oaks Run			
			Address		
		Casselberry, FL 32707			
	City/State and Zip Code alex.adams2121@gmail.com				
		= -	to be used for future annual repo	ort notification)	
For furthe	r information c	oncerning this matter, please ca	all:		
Alex Ada	ms		786 554-03		
Name of Person		Area Code I	Daytime Telephone Number		
Enclosed i	is a check for th	ne following amount:			
■ \$25.0	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address:		Street Addre			
Registration Section			Registration Section		
Division of Corporations				Division of Corporations	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#18:127 MT 7:17

ABA Realty, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{05/20/2021}{1}$ and assigned Florida document number L21000234706 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address ___. Florida ____

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

AMBR =	Authorized Member		142/8-125	
<u>Title</u>	<u>Name</u>	Address	Type of Action	
VP	Bruce W Adams	1417 Palancia Ave		
		Coral Gables, FL 33146		
			□Change	
MGR	Bruce W Adams	1417 Palancia Ave	□Add	
		Coral Gables, FL 33146	■Remove	
			□Change	
			□Remove	
			□Change	
			□Remove	
			Change	
			□Remove	
			□Change	
			□Add	
			□Remove	
			□ Chance	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) #115:127 Hit 7:17 E. Effective date, if other than the date of filing: _(optional) 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. September 20th 2021 Signature of a member or authorized representative of a member-Alex Adams Typed or printed name of signee

Filing Fee: \$25.00