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COVER LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: Real Deal En- Name of Limit	terprises 1/C
The enclosed Articles of Amendment and fee(s) are subt	nitted for filing.
Please return all correspondence concerning this matter t	to the following:
Savon	K Hodges Name of Person
Real	Deal Enterprises Firm/Company
3140 Wood	Address
Orlando,	City/State and Zip Code audn @ Gmail (Om o be used for future annual report notification)
E-mail address: (1)	o be used for future annual report notification)
For further information concerning this matter, please ca	
Savon Hodges	at (407) 861-7338 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & Certificate of Status	♥ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. FL 32314	Street Address: 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

Neal Deal Ente	ny As it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L21000234746}{}$	were filed on $05/20/2021$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3140 woodroff dr Orlando, FL 32837
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3140 woodruff di Orland 1FL 32837
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	on K Hodges
New Registered Office Address: 3140	Enter Florida street address
Orlan	NAS Florida 32837 City Zip Code
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	Savon K Hodges	3140 woodsuff dr	[]wdd
		Orlando, FC 32837	□Remove
			<u> </u>
			□Add
			□Remove
			□ Change
			<u>-</u> □Add
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If an effectiv <u>Note:</u> If th	date, if other than the dive date is listed, the date must the date inserted in this blocks effective date on the Dep	be specific and cannot b ck does not meet the	be prior to date of filing applicable statutory	or more than 90 days afte filling requirements, thi	r filing.) Pursuant to 605,0207
e record sp rd is filed.	pecifies a delayed effective	date, but not an effec	ctive time, at 12:01 a	i.m. on the earlier of: (b	5) The 90th day after the
Dated <u>J</u>	7-4-2028				
		Hodges			
		ignature of a niember of	or authorized represent	ative of a member	
	Sayon	Hodap	or printed name of sign		स १३