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24 JUL -6 PH 12: 21

## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

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Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Jaimie Miller  Name of Person  Miller Commercial Real Estate Group, LLC  Firm/Company  5233 SW 19th Pl  Address  Cape Coral, Fl. 33914  City/State and Zip Code  jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	
Please return all correspondence concerning this matter to the following:  Jaimie Miller  Name of Person  Miller Commercial Real Estate Group, LLC  Firm/Company  5233 SW 19th Pl  Address  Cape Coral, Fl. 33914  City/State and Zip Code  jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)	
Name of Person  Miller Commercial Real Estate Group, LLC  Firm/Company  5233 SW 19th P1  Address  Cape Coral, FL 33914  City/State and Zip Code jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)	
Name of Person  Miller Commercial Real Estate Group, LLC  Firm/Company  5233 SW 19th Pl  Address  Cape Coral, FL 33914  City/State and Zip Code jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)	
Miller Commercial Real Estate Group, LLC  Firm/Company  5233 SW 19th Pl  Address  Cape Coral, FL 33914  City/State and Zip Code jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)	
Firm/Company  5233 SW 19th PI  Address  Cape Coral, FL 33914  City/State and Zip Code  jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)	
Cape Coral, FL 33914  City/State and Zip Code jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)	
City/State and Zip Code jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)	
City/State and Zip Code  jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)	
City/State and Zip Code jaimiemiller22@gmail.com  E-mail address: (to be used for future annual report notification)	
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·	
Jaimie Miller 239 247-4245 at ()	
Name of Person Area Code Daytime Telephone Number	<del></del>
Enclosed is a check for the following amount:	
■ \$25.00 Filing Fee	f Status & py

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

Miller Commercial Real Estate Group, LLC

21 JUL -6 PH 12: 21

(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 Compa	ny were filed on May 27, 2021	and assigned
Florida document number 1.21000247645		<u>.                                    </u>
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lin	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "LLC" or t	he abbreviation "L.L.C."
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 agent and/or the new registered office address here:	e address on our records, enter the i	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Zip Code
	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 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

	authorized Member		PRIAN TOUR CAPTA	
<u>Title</u>	<u>Name</u>	Address	21 JUL -6 PH12: 21	Type of Action
AMBR	Jaimie Miller	5233 SW 19	21 JUL 26 11/12/21 Oth Pl., Cape Coral, FL 33914	≅Adđ
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ord specifies a filed.	a delayed effective date, but not an e	effective time, at 12:01 a.m. on th	e earlier of: (b) The 90th day afte
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