

L21 000 255 955

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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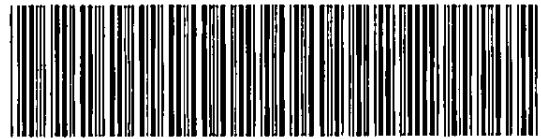
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

2023 APR 10 AM 9:09

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRE Becker PSL LLC

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:

Marc Offit

Name of Person

Firm/Company

324 Ramsay Rd

Address

Deerfield IL 60015

City/State and Zip Code

marc@bradenre.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marc Offit

847 757-5959
at ()

Name of Person 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 & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & 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**

BRE Becker PSL 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 June 2, 2021 and assigned
Florida document number L21000255955.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Ramsay Investment LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the 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)

324 Ramsay Rd
Deerfield, IL 60015

FILED
2023 APR 10 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FL

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 _____
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

Title	Name	Address	Type of Action
			Add
			Remove
			Change
			Add
			Remove
			Change
			Add
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			Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

Dated April 7, 2023

Ma. Ofel MOR
Signature of a member or authorized representative of a member

Marc Offit
Typed or printed name of signee

Filing Fee: \$25.00