

(Requestor's Name) (Address)	
(Address)	50037097
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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This is to convect First, my DBA 1st class Real Estate Hunter Iam the sole owner of the componention, and that is why I am removing CHANCE clayss; he is the Broker with whom I will work But who does not have ownership of the Business. second, connect my LLC registraction Team Home HUNTER LLC in with which I am the sole owner, and I place a manager. claus chance as It is a requirement that I must have for the OBPR what I notally wanted to register was TEAM HOME HUNTER LLC OBA 1st class_ RED/ GITNIG HUNTER GROUP Chance clours as a Broken of managen Thanks for your help. I've leen tryng to do this the right way for two 101-th S. OF-05-107/

COVER LETTER

TO: Registration Division of C			
	OME HUNTER LLC		
SUBJECT:	Name of Lin	nted Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	JOSE ORLANDO RAMII	REZ	
		Name of Person	
	TEAM HOME HUNTER	LLC	
		Firm/Company	
	1925 MONKS CT		
		Address	
	WEST PALM BEACH, F	L 33415	
		City/State and Zip Code	
	teamhomehunter@gmail.ce E-mail address: 6	om to be used for future annual report notifi	ication)
For further information	concerning this matter, please e	·	
JOSE ORLANDO RA	MIREZ	561 5418811	
	of Person		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)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 61 Tallahassee	n Section Corporations 327	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	porations allahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TEAM HOME HUNTER 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 $\frac{06/10/2021}{1}$ and assigned Florida document number $\frac{1.21000269896}{1.21000269896}$ 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 "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 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

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.

New Registered Agent's Signature, if changing 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>	Name	Address	Type of Action
AMBR	JOSE ORLANDO RAMIREZ	1925 MONKS CT, WEST PALM BEACH, FL 33415	5 □Add
			_ □Remove
			_ = Change
MGR	CLAUSS CHANCE	1925 MONKS CT, WEST PALM BEACH, FL 33415	; _ ≣Add
			_ □Remove
			_ 🗆 Change
			_ □Add
			_ □Remove
			_ □Change
			🗓 Remove
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Signature of a member or authorized representative of a member	AUGUST 5	2021			
	Dated	<u></u>			
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Filing Fee: \$25.00