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(Requ	estor's Name)	
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07/26/21--01013--017 **25.00

COVER LETTER

TO: Registration Sec Division of Corp		*	·
SUBJECT:	Teak P	real Estate L	<u>C</u>
		ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspor	idence concerning this matter	to the following:	
	Lan	Name of Person Real Estate Firm-Company	1
	1587 Fireth	Address)r
	Saraso	FC 34240 City/State and Zip Code	
	Mys Laux E-mail address: (to be used for future annual report notif	Ginail. Com
For further information co	neerning this matter, please ca	all;	
Name of	Person J	at (<u>207)</u> <u>299</u> . Area Code Daytime	O728 Telephone Number
Enclosed is a check for the	e 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	<u>:</u>	Street Address:	

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

`	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compa	any were filed on $\frac{(3/15/2021)}{2021}$ and assigned
Florida document number <u>L 2100027857</u> 7	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited li</u>	ishility company here:
s. If ancholing hance, given the new hance of the infinced in	annity company nece.
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	SE SE
Principal office address MUST BE A STREET ADDRESS)	
	to the second se
	一
Enter new mailing address, if applicable:	Ma ≥ II
Mailing address MAY BE A POST OFFICE BOX)	
maning unaress man DE ATOM OTTICE DOLL	<u>ි</u> ස
3. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on our records, <u>enter the name of the new register</u>
Name of New Registered Agent:	
Name of New Registered Agent:	
Name of New Registered Agent: New Registered Office Address:	Enter Florida street address
	Enter Florida street address , Florida City Zip Code
	, Florida

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
ANBR	Lauren Crowing	1587 Firethouse Lakes Dr. Sarasata, Pl 34240	XAdd
	<i></i>		□Remove
			□Change
MGR	Lauren Crowley	1587 Finethone Lavest Dr. Savasota, FL 34240	£ {\\dd
		III A C	Remove 202
		FT	່ ຜ ່ ∞ □Change
			□Add
			□Remove
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			□Add
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			□Add
			□Remove
			Change

Effective date, if other than the date of filing: 7/21/21 (optional)						 _		<u></u> .			_
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Signature of a member or authorized representative of a member	lote: If the concerns of the c	ifies a delayed e	21		2021.						
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Filing Fee: \$25.00