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2021 JUL 22 PK 2: 37 SECNE DARY OF STATE ALLAHASSEE, FLORID,

LLC Amend.

JUL 2 9 2021

D COMNELL

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Trusted Re	eal Estate Consutants, of Limited Liability Company	LLC
The enclosed Articles of Amendment and fee(s) a	are submitted for filing.	
Please return all correspondence concerning this r	matter to the following:	
	Marta Buke	
Trusted	- Real Estate Consultants L	
10478	Henburgst.	
By land	Henbaught. Address City/State and Zip Code Mes Burke @ JMCFHon dress: (to be used for future annual report notification)	
Email add	nes Burke @ JMCFHon dress: (to be used for future annual report notification)	185. (on
For further information concerning this matter, ple	lease call:	
Maritza Burke	at (321) 663 836 Area Code Daytime Telephone Number	_
Enclosed is a check for the following amount:		
□ \$30.00 Filing Fee Certificate of State		Status &

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

The Articles of Organization for this Limited Liability Company were filed on ____ Florida document number _ L 2 100()31139 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 "LLC." 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:

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.

Martha IK · Butte
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 Address Type of Action Title Name MGR James Burke 10478 Henburgst DAdd Orlando Fl 32832 BRemove □Change MGR Maritzam Burke 10478 Henbury St HAdd Orlando, F/ 32832 - Remove **□**Change MGR Biett Vogeler 3616 Harden Blad DAdd Lakeland 13F | 33803 | Remove Suite 358 __ Change ☐Remove □Change □Add □Remove _____ □Change _____ 🗆 Add □Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Please substate Registered
Please substite Registered agent Maritza M Burke for Carrent James Burke
Carrent James Burk-a
Please substite Maritza M Burke for Current Manager James Burke
Hor Current Manager James Burke
Please add manager Brett Vogeler
E. Effective date, if other than the date of filing: Ju 20, 202 (optional) (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 54/202021
Signature of a Dember of authorized representative of a member Sames Runk e
Typed or printed name of signee

Filing Fee: \$25.00