## 121000326369

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

A. RIVERS NOV 1 7 2021



500376296855

11/08/21--01015--023 \*+25.00

2021 NOV -8 PH 12: 27
SECT THARY OF STATE

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Our Florida	Investments LLC				
30D3EC1.	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Rodger A Marty				
	•	Name of Person			
	<del></del>	Firm/Company			
	167 Villa Di Este Ter, Uni				
		Address			
	Lake Mary, FL 32746				
	•	City/State and Zip Code	•		
	rodger.marty@gmail.com				
For further information a	E-mail address: (	to be used for future annual report no	mication)		
	oncerning this matter, picase c				
Rodger A Marty		321 217-8572 at ()			
Name o	f Person	Area Code Daytir	me Telephone Number		
Enclosed is a check for th	ne 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 Addres		Street Address:	ection		
Registration Section Division of Corporations		<del>-</del>	Registration Section Division of Corporations		
P.O. Box 632	7	The Centre of	Tallahassee		
Tallahassee, l	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Our Florida Investments LLC			
(Name of the Lin	nited Liability Company a (A Florida Limited Liabi	s it now appears on our record lity Company)	<u>ls.</u> )
The Articles of Organization for this Limited	Liability Company wer	re filed on July 19, 2021	and assigned
lorida document number L21000326369	·		
his amendment is submitted to amend the fo	llowing:		
a. If amending name, enter the new name	of the limited liability	company here:	
he new name must be distinguishable and contain the	words "Limited Liability C	Company," the designation "LLC	or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
	_	····	<del> </del>
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE  B. If amending the registered agent and/or gent and/or the new registered office address.  Name of New Pagistered Agents	registered office addi	ess on our records, <u>enter</u>	the name of the new register
Name of New Registered Agent:			7.0
New Registered Office Address:	167 Villa Di Este Te		<u> </u>
	Lake Mary	, Flo	orida $\frac{32746}{9Zip \Omega de}$
		City	Zip 🔀 de
lew Registered Agent's Signature, if changing	Registered Agent:		- TE

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 of removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Amerlia M Conrad	167 Villa Di Este Ter Unit 205	
		Lake Mary, FL 32746	■Remove
MGR	Rodger A Marty	167 Villa Di Este Ter Unit 205	<b>≅</b> Add
		Lake Mary, FL 32746	□Remove
			□Change
AMBR	Deborah D Marty	167 Villa Di Este Ter Unit 205	<b>=</b> Add
		Lake Mary, FL 32746	□ Remove
			□Change
			□ Add
		-	Remove
			□Change
<del></del>			□Add
			Remove
			□Change
		<del> </del>	
			□ Remove
			□Change

				<del></del>
		<del>_</del>		
				<del></del>
<del></del>			7 <u> </u>	
	<del></del>		· · · · · · · · · · · · · · · · · · ·	<u>.</u>
				<del></del>
	<del></del>	·	***	
	• • • • • • • • • • • • • • • • • • • •	•••		_
				<del></del>
				<del></del>
				<b></b>
***				
	<del></del>			
				<del></del>
ffective date, if other than the fan effective date is listed, the date must	date of filing:	to date of filing or more th	(optional)	605 D207
Note: If the date inserted in this blo	ock does not meet the applic	able statutory filing req		
locument's effective date on the Do	partment of State's records			
record specifies a delayed effective	e date, but not an effective t	ime, at 12:01 a.m. on the	e earlier of: (b) The 90th day a	ifter the
d is filed.		,	(-, ,	
November 3	2021			
vated	•	·		
1 Cecle (	DM -			
	Signature of a member or auth	orized representative of a r	nember	