

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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09/13/21--01819--002 **25.00



COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

| Division of Corporations | |
|--|---|
| SUBJECT: DWELL Real Na | me of Limited Liability Company |
| The enclosed Articles of Amendment and feet | s) are submitted for filing. |
| Please return all correspondence concerning th | nis matter to the following: |
| | Name of Person |
| Dwe | LL Realty Group LLC |
| 373 | arcadia drive |
| Welli — dwel E-mai | City/State and Zip Code Realtypalm Beach a gmail . Com address: (to by 45fd for future annual report notification) |
| For further information concerning this matter | r. please call: |
| BRian George Name of Person | at (541) 503 - 0328 Area Code Daytime Telephone Number |
| Enclosed is a cheek for the following amount: | |
| ☐ \$25.00 Filing Fee ☐ \$30.00 Filing I Certificate of | |
| Mailing Address: Registration Section | Street Address: Registration Section Division of Corporations |
| Division of Corporations | Division of Corporations |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

| N 0 | 2021 SEP | 13 PM 4:34 |
|---|---|---------------------------------------|
| (Name of the Limited Liability Compa (A Florida Limited) | inv as it now appears on our records. | GRY OF STATE SSEE, FLOW |
| (| | 1 |
| The Articles of Organization for this Limited Liability Company | were filed on $\frac{7/24/27}{2}$ | and assigned |
| Florida document number <u>121000336</u> 93 | 58 | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liah | oility company here: | |
| The new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | beian locoral |) |
| (Principal office address MUST BE A STREET ADDRESS) | 373 arcadia | drive |
| | wellington, F | 1 33414 |
| Enter new mailing address, if applicable: | Belan Geor | al |
| (Mailing address MAY BE A POST OFFICE BOX) | 373 arcadia | Jarne. |
| Training was (Co. 1771 D.D. 1771 Oct. 1772 Delly | Wellngton, Fr | 33414 |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, enter the | name of the new registered |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Floric | ia |
| | 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 = Au | uthorized Member | | |
|--------------|------------------|---|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| Mgl | Lisa Ruiz | 5260 3rd Rd | □Add |
| | | LAKE WORTH, FR | DRemove |
| | | 33467 | □Change |
| MGL | Kami TURTUR | RO 373 ARCAdia de | □Add |
| V | | RO 373 ARCADÍA DA Wellington Fr. 3341; | Littemove |
| | | | Change |
| | | | □Add |
| | | | □Remove |
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| D. II am | ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| (If an of) <u>Note:</u> | ive date, if other than the date of filing: 9/7/202/ (optional) ective 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)(If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records. |
| f the re cor ecord is fi | d 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 led. |
| Dated | 9/7/2021. 2021. |
| | Brum Jule Denge Significant of a member or adhorized representative of a member |
| | BRIAN Jude George Typed or printed name of signed |