## L21000348578

| (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



700387895447

05/27/22--01016--007 \*\*25.00

AUG 1 2022 S. PRATHER

## **COVER LETTER**

TO:

| TO: Registration<br>Division of C             |   |   |   |  |
|---|---|---|---|--|
|   | REALTY HOLDING LLC                                      |   |   |  |
| SUBJECT:                                      | Name of Lim   | ited Liability Company  |   |  |
| The enclosed Articles of                      | of Amendment and fee(s) are sub                         | mitted for filing.  |   |  |
| Please return all corres                      | pondence concerning this matter                         | to the following:   |   |  |
|   | MARIA C LEON  |   |   |  |
|   |   | Name of Person  |   |  |
|   | KINGDOM CORPORATE                                       | E SERVICES LLC  |   |  |
|   |   | Firm/Company  |   |  |
|   | 1420 CELEBRATION BL                                     | VD SUITE 200  |   |  |
|   |   | Address   |   |  |
|   | CELEBRATION, FL. 347                                    | 747   |   |  |
|   |   | City/State and Zip Code   |   |  |
|   | kcservicesusa@gmail.com                                 |   | - ASSOCIATION N   |  |
| For further information                       | e-mail address: (<br>n concerning this matter, please c | to be used for future annual report nall:                                 | ouncation)  |  |
| MARIA C LEON                                  |   | 407 6308739<br>at ( )   |   |  |
| Name  | e of Person   | Area Code Day   | time Telephone Number   |  |
| Enclosed is a check for                       | r the following amount:                                 |   |   |  |
| ■ \$25.00 Filing Fee                          | □ \$30.00 Filing Fee &<br>Certificate of Status         | ☐ \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | ☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |
| Mailing Add                                   |   | Street Address:<br>Registration   |   |  |
| Registration Section Division of Corporations |   | Division of Corporations  |   |  |
| P.O. Box 6                                    |   | The Centre o  |   |  |
| i allahassee                                  | e, FL 32314   | 2415 N. Monroe Street, Suite 810  |   |  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

|   | 2022 MAY 27 |  |
|---|-------------|--|
|   | PH          |  |
| 1 | σ           |  |
| 7 | 0           |  |

| CLOVER REALTY HOLDING LLC   |                                       |
|---|---------------------------------------|
| (Name of the Limited Liability Company as it now appears on ou<br>(A Florida Limited Liability Company)                                 | r records.)                           |
| The Articles of Organization for this Limited Liability Company were filed on $\frac{08/03/202}{1}$                                     | and assigned                          |
| Torida document number L21000348578   |                                       |
| This amendment is submitted to amend the following:   |                                       |
| 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 Company," the designati                                    | on "LLC" or the abbreviation "L L C " |
| Enter new principal offices address, if applicable:   |                                       |
| Principal office address MUST BE A STREET ADDRESS)  |                                       |
| <del></del>   |                                       |
| Enter new mailing address, if applicable:   |                                       |
| Mailing address MAY BE A POST OFFICE BOX)   |                                       |
|   |                                       |
| 3. If amending the registered agent and/or registered office address on our records gent and/or the new registered office address here: | , enter the name of the new register  |
| Name of New Registered Agent:   | <del></del>                           |
| New Registered Office Address:  |                                       |
| Fater Florida stree   | A 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.

City

Florida

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 |
|--------------|---------------------|---------------------------------|----------------|
| AMBR         | TATIANA RIVERA      | 1420 CELEBRATION BLVD SUITE 200 | □Add           |
|              |                     | CELEBRATION, FL 34747           | Remove         |
|              |                     |                                 | □Change        |
| AMBR         | AIDA TATIANA RIVERA | 1420 CELEBRATION BLVD SUITE 200 | <b>∃</b> Add   |
|              |                     | CELEBRATION, FL 34747           | □Remove        |
|              |                     |                                 | □Change        |
|              |                     |                                 | □Add           |
|              |                     |                                 | □Remove        |
|              |                     |                                 | □Change        |
|              | <del></del>         | <del> </del>                    | □Add           |
|              |                     |                                 | □Remove        |
|              |                     | <del></del>                     | □Change        |
|              |                     |                                 | □Add           |
|              |                     |                                 | □Remove        |
|              |                     |                                 | □Change        |
|              |                     | <del></del>                     | □Add           |
|              |                     |                                 | □Remove        |

Change

| E. Effective date, if other than the date of filing:  (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 it pursuant to 605 0207 (3 kb).  Nate: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document is 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:    Dated   05/20 |  |   |                        |   |   |                         |
|---|--|---|------------------------|---|---|-------------------------|
| E. Effective date, if other than the date of filing:  |  |   |                        |   |   |                         |
| E. Effective date, if other than the date of filing:  |  | *************************************** |                        |   |   |                         |
| E. Effective date, if other than the date of filing:  | 1700 10 10 10  |   |                        |   |   |                         |
| E. Effective date, if other than the date of filing:  |  |   |                        |   |   |                         |
| E. Effective date, if other than the date of filing:  |  |   |                        |   |   |                         |
| E. Effective date, if other than the date of filing:  | <del></del>  |   |                        |   |   |                         |
| E. Effective date, if other than the date of filing:  |  |   |                        |   |   |                         |
| E. Effective date, if other than the date of filing:  |  |   |                        |   |   |                         |
| 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.   |  |   |                        |   |   |                         |
| 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.   |  |   |                        |   |   |                         |
| 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.   |  |   |                        |   |   |                         |
| 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.   | <u></u>  |   |                        | <u></u>   |   |                         |
| record is filed.  | Note: If the date inserted in th                       | is block does not meet                  | the applicable statu   | (option filing or more than 90 days after story filing requirements, this | onal)<br>filing ) Pursuant to 605<br>date will not be liste | 0207 (3)(b)<br>d as the |
| Dated 05/20 2022  Signature of a member or authorized representative of a member  Signature of a member of authorized representative of a member  | If the record specifies a delayed efforecord is filed. | ective date, but not an o               | effective time, at 12  | :01 a.m. on the earlier of: (b)   |   |                         |
| Signature of a member or authorized representative of a member  | 05/20<br>Dated   | 20                                      | 022                    |   | ALLAN   | 2022 MA                 |
| Signature of a member or authorized representative of a member  |  | JuRate -                                | <del></del>            |   | か:<br>の:<br>: : : : : : : : : : : : : : : : : :             | Y 27                    |
|   | JACINTO RIVERA   |   | ber or authorized repr | resentative of a member   | FLORID  | PH 6:                   |