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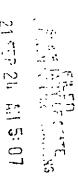
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COVER LETTER

SUBJECT:	Add Manager				
SUBJECT		Name of Lim	ited Liability Company		
The enclosed	l Articles of Ar	nendment and fee(s) are sub	mitted for filing.		
Please return	all correspond	ence concerning this matter	to the following:		
		Janet Ramallo			
			Name of Person		
		Phoenix Realty			
	Firm/Company				
		1560 Matthew Dr. Suite I			
			Address		
		Fort Myers, FL 33907			
			City/State and Zip Code		
		jpramallo@aol.com			
		E-mail address: (to be used for future annual report notifica	tion)	
For further in	formation con	cerning this matter, please co	all:		٨,
Janet Ramall			703 944-5600 at ()		
	Name of P	erson	Area Code Daytime To	lephone Number	
Enclosed is a	check for the	following amount:			4 400
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclose	10

TO:

Registration Section **Division of Corporations**

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

Street Address: 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

Phoenix Realty, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{3/17/2021}{}$ and assigned Florida document number L 21000369602 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 "L.L.C." 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: Enter Florida street address Florida City

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 Reg. stered 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>	<u>Address</u>	Type of Action
MGR	Eduardo Jose Falcone	1560 Matthew Dr. Suite F Fort Myers, FL 33907	XAdd
			□Remove
			□Change
			🗆 Add
		·	□Remove
			□ Change
			🗆 Add
			□Remove
			DGhange
			☐Add ☐Remove
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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be principle. Note: If the date inserted in this block does not meet the app document's effective date on the Department of State's record	licable statutor	ig or more than 90		
e record specifies a delayed effective date, but not an effective rd is filed.	e time, at 12:01	a.m. on the ear	ier of: (b) The 90th	day after the
Dated September 21. 2021	·			
Signature of a mytober or au	to 1			

Filing Fee: \$25.00