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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Muncera and Sherry Realtor LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sharifa Hutchins

Name of Person

Firm/Company

13716 Laranja St

Address

Clermont, FL 34711

City/State and Zip Code

sherrypatron78@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharifa Hutchins

407 666-0368

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

Muncera and Sherry Realtor LLC

If Changing Registered Agent, Signature of New Registered Agent

100

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

[illegible]

[illegible]

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 October 22nd 2024

Signature of a member or authorized representative of a member

Sharifa Hutchins

Typed or printed name of signee

Filing Fee: \$25.00