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COVER LETTER

TO:

Registration Section Division of Corporations

REESHAB SUBJECT:	REALTY LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Rohan Patel		
		Name of Person	
	Reeshab realty lic		
		Firm/Company	
	1718-25th st		
		Address	
	Niceville FL 32578		
		City/State and Zip Code	<u></u>
	Rohanep2005@yahoo.com		
	E-mail address: (to be used for future annual report notil	ication)
For further information c	oncerning this matter, please ca	all:	
Rohan Patel		310 7747544 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	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 Address Registration: Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REESHAB REALTY LLC	
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited Liability Company were filed on $\frac{1}{2}$	2/06/2021 and assigned
Florida document number 1.21000514451	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company h	ere:
The new name must be distinguishable and contain the words "Limited Liability Company," the	designation "E.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	: <u>; p</u>
(Principal office address MUST BE A STREET ADDRESS)	11 48
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered office address on our	recards enter the name of the new regi
agent and/or the new registered office address here:	enter the name of the new regi
Name of New Registered Agent:	
New Registered Office Address:	
	orida street address
	. Florida

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

Zip Code

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
MBR	Mihirkumar Patel	1718 25th st	□Add
		Niceville FL 32578	□Remove
			≡ Change
AP	Champakbhai patel	1718 25th st	□Add
		Niceville FL 32578	■Remove
			□Change
			□Add
			□Remove
			□Change
			□∧dd
			□Remove
			□Remove
			□Change
			□Add
			□Remove
			□Change

		 			
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fective date, if other than the effective date is listed, the date mote: If the date inserted in this ocument's effective date on the	e date of filing: _ ust be specific and car block does not mee	t the applicable	ate of filing or more e stanutory filing re	(optiona than 90 days after fili equirements, this da	ng.) Pursuant to 605.0207
ecord specifies a delayed effect is filed.	ve date, but not an	effective time.	at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
Aug. 20th	·	2024			
im			ed representative of		