## L21000535174

(Req	uestor's Name)	
(Add	ress)	
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(City.	/State/Zip/Phone	e #)
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

MRRE IN SUBJECT:	VESTMENTS LLC	e i i	•
	Name of Li	mited Liability Company	<del></del>
<i>:</i>			
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	nondence concerning this matte	r to the following:	
	Toni Daigle		
		Name of Person	<del></del>
	DORCO Enterprises		
		Firm/Company	
	911 S 8th St., Unit B		
		Address	
	Fernandina Beach, FL 320	034	
	<del></del>	City/State and Zip Code	<del></del>
	contact@dorcoent.com		
		to be used for future annual report not	tification)
For further information	concerning this matter, please c	ali:	
MELISSA RICKS		904 548-8540	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 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 Se Division of Con The Centre of T 2415 N. Monro	rporations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MRRE INVESTMENTS 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 12/21/2021 Florida document number L21000535174 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

## 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.

or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MBR	MATTHEW RICKS	65121 Lagoon Forest Dr	
		Yulee, FL 32097	
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ctive date is listed, the date must	be specific and cannot be prior to	o date of filing or more than 90 da	( <b>optional)</b> lys after filing.) Pursuant to 605
ent's effective date on the De	ek does not meet me annier	ble statutory filing requirement	ste this dots will L - 1'
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specifies a delayed effective	date, but not an effective tin	ne, at 12:01 a.m. on the carlier	The 000 Him of
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November 15	, 2002		
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Melissa Richs	11/15/22 10:28 AM EST		
Melissa Ricks	EST IHUF-4TKH-1EZA-JZKS	ized representative of a member	