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T. MATTHEWS FEB 1 4 2022

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Justice Res	sidential, LLC	-
SUBJECT:	Name of Lim	sidential, LLC	"
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Ma	Hhew Justice	
		Name of Person	
	Justice	Residential, LI	LC
	2169	Acorn Manor	
			_
	Midd	City/State and Zip Code	068
	E-mail address: (justice 9174@gm	fication)
For further information c	oncerning this matter, please c	all:	
	V Justice FPerson	at (38le) 27lo-	- 1816 ne Telephone Number
Name o	i r cison	Area Code Dayum	ic receptione (value)
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 Addres		Street Address:	ation
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632	.7	The Centre of T	Fallahassee
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

US+i	CE RESI	dentent 1 ny as it now appears on oliability Company)	QLPC 3: 15	_
(A	Florida Limited L	hiability Company)		
The Articles of Organization for this Limited Liab	oility Company	were filed on <u>12</u>	30/2021 and	l assigned
Florida document number <u>L22000508</u>			·	
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of the	he limited liabi	lity company here:		
The new name must be distinguishable and contain the word	ds "Limited Liabili	ity Company," the designa	ation "LLC" or the abbreviation	n "L.L.C."
Ç				
Enter new principal offices address, if applicab				
(Principal office address MUST BE A STREET.	<u>ADDKESS)</u>			
			····	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u>2X)</u>			
B. If amending the registered agent and/or reg agent and/or the new registered office address l		ddress on our recor	ls, <u>enter the name of the</u>	new registered
Name of New Registered Agent:				
New Registered Office Address:				
		Enter Florida st	reet address	
			, Florida	
		City	Zip C	ode

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 Registered 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>	Address	Type of Action
MGR	Matthew Justice	2169 Acorn Manor	SAdd
		Middleburg, FL	□Remove
		32068	□Change
		<u> </u>	□Add
			□Remove
			□Change
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If an effe	te date, if other than the date of filing:
	nt's effective date on the Department of State's records.
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