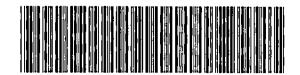
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## **COVER LETTER**

| TO: Registration Se<br>Division of Cor |   |   |   |  |  |  |
|--|---|---|---|--|--|--|
| Harsham R                              | ealty LLC                                       |   |   |  |  |  |
| SUBJECT:                               | Name of Lin                                     | ited Liability Company  |   |  |  |  |
| The enclosed Articles of               | Amendment and fee(s) are sub                    | omitted for filing.   |   |  |  |  |
| Please return all correspo             | ondence concerning this matter                  | to the following:   |   |  |  |  |
|  | Stephen Hart Harsham                            |   |   |  |  |  |
|  |   | Name of Person  |   |  |  |  |
|  | Harsham Realty LLC                              |   |   |  |  |  |
| Firm/Company                           |   |   |   |  |  |  |
|  | 1030 Ruthic Road                                |   |   |  |  |  |
| Address                                |   |   |   |  |  |  |
|  | The Villages, FL 32163                          |   |   |  |  |  |
|  | <del></del>                                     | City/State and Zip Code   |   |  |  |  |
|  | steve@harsham.com                               |   | <del></del>   |  |  |  |
| For further information of             | encerning this matter, please c                 | to be used for future annual reportable:                        | t notification)   |  |  |  |
| Stephen Hart Harsham                   |   | 443 538-34<br>at ( )  | 74  |  |  |  |
| Name of Person                         |   |   | aytime Telephone Number   |  |  |  |
| Enclosed is a check for the            | he following amount:                            |   |   |  |  |  |
| X S25.00 Filing Fee                    | ☐ \$30.00 Filing Fee &<br>Certificate of Status | S55.00 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  |   | Registration  | Street Address: Registration Section  |  |  |  |
| Division of Corporations P.O. Box 6327 |   |   | Division of Corporations The Centre of Tallahassee  |  |  |  |
| Tallahassee, FL 32314                  |   |   | 2415 N. Monroe Street, Suite 810  |  |  |  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Harsham Realty LLC

<sup>2022</sup> JUN 13 - AM 9: 08

(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 January 11, 2022 and assigned Florida document number L22000024575 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Stephen Hart Harsham LLC 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

## 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.

Cin

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 |
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| ective date, if other than the date in effective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Department. | specific and cannot be does not meet the a | ipplicable statute  |                     |                      |                 |
| ecord specifies a delayed effective d<br>is filed.  | ate, but not an effect                     | tive time, at 12:0  | 01 a.m. on the ear  | ier of: (b) The 90tl | h day after the |
| ted June 8  | 2022                                       |                     |                     |                      |                 |
| W 2/1/2   | · · · · · · · · · · · · · · · · · · ·      | · ·                 |                     |                      |                 |
| Si  | enature of a member or                     | r authorized repres | sentative of a memb | er                   |                 |