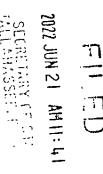


(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(eserces 2nd, name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
J. HORNE				
SEP 1 2 2022				





06/21/22--01004--029 **25.00





COVER LETTER

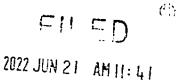
	ration Sec on of Corp			, and	"
	ARKEL B	ERTO REALTY LLC			
SUBJECT:	<u></u>	Name of Lim	ited Liability Company		-
The enclosed Ar	ticles of A	mendment and fee(s) are sub	omitted for filing.		
Please return all	correspon	dence concerning this matter	to the following:		
		М	IAURO G SCATTOLINI		
			Name of Person	_	-
			C&M CPA, LLC		
		-	Firm/Company		_
		175	SW 7TH ST SUITE 1107		
			Address	<u> </u>	<u> </u>
			MIAMI, FL 33130		
			City/State and Zip Code		_
			HTING@CANDMCPA.CO		_
Dan Gumban in Can	.:		to be used for future annual rep	ort notification)	
		ncerning this matter, please co	au:		
MAURO SCAT			305 517-3 at ()		
	Name of l	Person	Area Code	Daytime Telephone Numb	er
Enclosed is a che	eck for the	following amount:			
■ \$25.00 Filin	ig Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	ed) Certific	Filing Fee, cate of Status & ed Copy al copy is enclosed)
	g Address: tration Sc		Street Add		
		rporations	-	on Section of Corporations	
P.O. E	3ox 6327			e of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



MARKEL BERTO REALTY LLC

SECRETARY OF COMPany as it now appears on our records, LAHASSEE, Fig. (A Florida Limited Liability Company)

	F	lorida
	Enter Florida street addre	288
-		
ess nere:		
	ddress on our records, ente	r the name of the new registere
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<u>E BOX)</u>		
r basa		
EET ADDRESS)		
icable:		
: words "Limited Liabili	ty Company," the designation "EL	C" or the abbreviation "L.L.C."
of the limited liabi	lity company here:	
llowing:		
·		
Liability Company	were filed on onzerozz	and assigned
	llowing: of the limited liabi words "Limited Liabili icable: EET ADDRESS)	of the limited liability company here: words "Limited Liability Company," the designation "EL icable: EET ADDRESS) E BOX) registered office address on our records, enteress here:

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
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Note: If	e date, if other the date is listed, the tate inserted in a effective date of	n this block does	not meet the	applicable	e of filing or most statutory filing	(0 e than 90 days : requirements.	ptional) ofter filing.) Pursu this date will n	ant to 605,0207 (2 of be listed as th
e record : rd is filed	specifies a delayed I.	effective date, b	ut not an effe	ective time, a	nt 12:01 a.m. or	the earlier of	: (b) The 90th	day after the
Dated	JNE 17TH	110	2022 - 1/2 D	2 Z	/ 2			
	•	Signature	VICE I	or authorized	representative of	f a member		
		Enactin	a memice	vi adamiiret	- opresentative t	. a member		

Filing Fee: \$25.00