## KZZ000049408

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2022 FEB 22 AM 7: 20
SECRETARY OF STATE

A. BUTLER
MAR 2 - 2022

## **COVER LETTER**

TO:	Registration Sec			•	<b>.</b>
CLID I	·		REAVES PROPERT	IES LLC	
SUBJ	EC1:	Name of Limi	ted Liability Company		•
The er	nclosed Articles of A	Amendment and fee(s) are subt	mitted for filing.		
Please	return all correspon	ndence concerning this matter	to the following:		
			STEPHEN R	EAVES	
			Name of Person		
			Firm/Company		<del></del>
			217 SEAVIEW ST		
			Address		
	•	MAN	HATTAN BEACH, CA	90266	
		SR	City/State and Zip Code EAVES3@GMAIL.CO	DM	
		E-mail address: (	to be used for future annual rep	ort notification)	-
For fi	irther information co	oncerning this matter, please ca	all:		
		STEPHEN REAVES	at ( <u>813</u> )	297-5320	
	Name o	f Person	Area Code	Daytime Telephone Num	ber
Enclo	sed is a check for th	ne following amount:			
Ø \$	525,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclose	Certif ed) Certif	Filing Fee, feate of Status & fed Copy mal copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

	PROPERTIES LLC 7	022 FFR 22_ <b>a</b> m	L 7: 20_
	Liability Company as it now appears on o Florida Limited Liability Company)	むしれご けんち こりた	STATE
The Articles of Organization for this Limited Liab	ility Company were filed on 127	22 LLAMASSE	and assigned
Florida document number <u>L22000049408</u>			
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of th	e limited liability company here:		
REAVES MANAGEMENT GROUP  The new name must be distinguishable and contain the word	LL C Is "Limited Liability Company," the designa	ition "LLC" or the at	obreviation "L.L.C."
Enter new principal offices address, if applicab (Principal office address MUST BE A STREET)	le:		
Enter new mailing address, if applicable:	217 SEAVIEW S	г	
(Mailing address MAY BE A POST OFFICE BO	DX) MANHATTAN BEA	сн, Ся 9026	<u> </u>
B. If amending the registered agent and/or regagent and/or the new registered office address  Name of New Registered Agent:	REGISTEREO AGENTS	NC	ne of the new registered
New Registered Office Address:	7104 4ru St N , STE 30 Enter Florida st		
	ST PETERSBURG	, Florida	33702
	City		Zip Code

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

New Registered Agent's Signature, if changing Registered Agent:

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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	REATES CAPETIL HOLDINGS LIC	217 SEAMEN ST	[\$\int \text{Add}
		MANHATTAN BEACH, CA 90266	□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
		<del> </del>	□Remove
			□Change
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			□ Add
			□Remove
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			□Remove
			□Change

imend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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n effect <b>te:</b> If	e date, if other than the date of filing:
cord s s filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	FEBRUARY 16 2022
	Stales
	Signature of a member or authorized representative of a member
	Samuel
	STEPHEN REAVES Typed or printed name of signee