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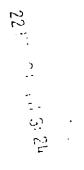
(Re	equestor's Name)	;		
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T. MATTHEWS APR - 1 2022

COVER LETTER

Registration Section Division of Corporations TO:

AKEY REAL ESTATE HOLDINGS

SUBJECT:					
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
	ondence concerning this matter	-			
	Timothy Paul Akey				
		Name of Person			
	Akey Real Estate Holdings	, LLC			
	Firm/Company				
	8108 SW 10th PL				
		Address			
	Gainesville FL 32607				
	timothyakey@msn.com	City/State and Zip Code			
	E-mail address: (to be used for future annual report not	fication)		
For further information c	oncerning this matter, please c	all;			
Timothy Paul Akey		352 682-8411			
Name o	f Person	at () Area Code Daytim	e Telephone Number		
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 Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AKEY REAL ESTATE HOLDINGS

32 11 - 01 [1] 3: 24

(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 ______ and assigned Florida document number 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 "LLC." 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.

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
AMBR Timothy R Akey	Timothy R Akey	8108 SW 10th PL	
			□Add
		Gainesville, FL	
		■Remove	
	32607		
			□Change
			□Remove
			□Change
			□Add
			_
			Remove
			ST OL
		Change	
			□Remove
			CRemove
			□ Change
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			□Remove
		□Change	
			□Add
			□Remove
			□Change

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