N22000082098

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| MAR 22 2022 |
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SECRETARY OF STATE

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COVER LETTER

Registration Section

TO:

| porations | | |
|---|---|---|
| RTH REAL ESTATE LLC | | |
| Name of Limi | ted Liability Company | |
| Amendment and fee(s) are sub- | mitted for filing. | |
| | | |
| ndence concerning this matter | to the following: | |
| RICHARD BARILE | | |
| | Name of Person | |
| | Firm/Company | ····· |
| 56 LEEWARD ISLAND I | | |
| | Address | |
| ST. AUGUSTINE, FL. 320 | 080 | |
| | City/State and Zip Code | |
| • | | (Continu) |
| | | incation |
| oncerning this matter, please ca | ati: | |
| | 904 347-6687 | |
| f Person | Area Code Daytim | e Telephone Number |
| ne following amount: | | |
| ☐ \$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) |
| Section Corporations 27 | Street Address: Registration Se Division of Cor The Centre of 1 | rporations Fallahassee |
| | Amendment and fee(s) are substance concerning this matter RICHARD BARILE 56 LEEWARD ISLAND E ST. AUGUSTINE, FL. 320 RICHBARILE@GMAIL.C E-mail address: (oncerning this matter, please concerning this matter) Person the following amount: El \$30.00 Filing Fee & | Name of Limited Liability Company Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: RICHARD BARILE Name of Person |

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

2022 MAR 11 PM 12: 49

LEVEL EARTH REAL ESTATE LLC

REAL ESTATE LLC

(Name of the Limited Liability Company as it now appears on our records.) LAHASSEE, FL

| The Articles of Organization for this Limited Liability Company | y were filed on FEBRUARY 21, 2022 | and assigned |
|--|---|-----------------------|
| Florida document number L22000082098 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lia | bility company here: | |
| RICHARD JOHN BARILE LLC | | |
| The new name must be distinguishable and contain the words "Limited Liab | oility 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) | | <u> </u> |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office agent and/or the new registered office address here: | address on our records, enter the na | - |
| Name of New Registered Agent: | .,,,,, | |
| New Registered Office Address: | Enter Florida street address | |
| | , Florida _ | |
| | City | Zip Code |

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> | <u>Address</u> | Type of Action |
|--------------|-------------|----------------|----------------|
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| Note: If the date inser | er than the date of f d, the date must be specifi- rted in this block does r date on the Department | not meet the applica | able statutory titin | (opt ore than 90 days aft g requirements, th | tional) er filing.) Pursuant to his date will not be | 605.020 listed a |
| record specifies a del d is filed. | layed effective date, bu | t not an effective ti | me, at 12:01 a.m. | on the earlier of: | (b) The 90th day | after the |
| MARCH 7 | | 2022 | | | | |
| | 10 B | Λ | | | | |
| ئر | 7/1/1/2 | / (| | | | _ |
| -/ | Signature | of a member or author | orized representative | e of a member | | _ |

Filing Fee: \$25.00