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2022 HAR 16 AM 6: 38 SECRETARY OF STATE

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COVER LETTER

Division of Corporations LEMON STREET REALTY LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Brian B. Burck Name of Person Firm/Company 5601 Mariner Street Suite 200 Address Tampa, Florida 33609 City/State and Zip Code brianb@bbkm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 294-3874 Brian B. Burek Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee, **■** \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address:

Mailing Address:

TO:

Registration Section

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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

FILED

LEMON STREET REALTY LLC

company has been notified in writing of this change.

T REALTY LLC 2022 MAR 16 AM 6: 38

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

(A Florida Limited Liability Company)

CE OPITAGE VIOLETTE

SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company were filed on February 7, 2022 LAHASSEE, FL and a Florida document number __L22000087265 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 "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 _____, Florida ___ City 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

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
MGR	Christopher G. Brown	1008 Riverside Ridge Road	≣ Add
		Tarpon Springs, Fl. 34689	□Remove
MGR Brian Bure	Brian Burck	16307 Villarreal De Avila	□Add
		Tampa, Ft. 33613	≣Remove
			LJChange
			□Change
			□Remove
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