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COVER LETTER

TO:

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

summer The Carred Place	GUOUD IIA
SUBJECT: The Sacred Place Name Name Name Name Name Name Name Nam	me of Limited Liability Company
The enclosed Articles of Amendment and fee(s	s) are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
<u>Haywa</u>	Name of Person
The Sa	ecred Place Group, UC
<u>7154 SH</u>	teer Blade Drive Address
Zeohyd	NIC FL 33541
	City/State and Zip Code
<u>haywara</u> E-mail	djr e yahoo. com address: (to be used for future annual report notification)
For further information concerning this matter,	please call:
Hayward Lampley Jr Name of Person	at (<u>72-7</u>) <u>408 - 4700</u> Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$25.00 Filing Fee S30.00 Filing Fee Certificate of S	<u> </u>
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Sacred Place Group, L (Name of the Limited Liability Company	ic	
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appears on our records.)	
,	ovinpanty)	
The Articles of Organization for this Limited Liability Company we	ere filed on <u>02/22/2022</u> and	l assigned
Florida document number <u>L22000095339</u> .	, ,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	y company here:	
AVILA REAL ESTATE, UC The new name must be distinguishable and contain the words "Limited Liability		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation	n "L.L.C."
Enter new principal offices address, if applicable:	3387 JUNITER SPRINGS ST	PEET
(Principal office address MUST BE A STREET ADDRESS)	3387 JUNITER SPRINGS ST WESLEY CHAPEL, FL 335	43
_	·	
Enter new mailing address, if applicable:	3387 JUNIPER SPFINGS S	TREET
(Mailing address MAY BE A POST OFFICE BOX)	3387 JUNIPER SPFINGS S WESLEY CHAPEL, FL 33	3543
	•	
_		
B. If amending the registered agent and/or registered office add	iress on our records, enter the name of the	new registered
agent and/or the new registered office address here: N/A	20'	
Name of New Registered Agent:	DCT	
	·	•
New Registered Office Address:		<u> </u>
	Enter Florida street address	y "
	Florida 🔆 😛	
	City ZPC	ode

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
			□Remove
			🗀 Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
		***************************************	☐ Change
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			□Remove
			□Change
	 		□Add
			□ Remove
			□Change

Effective date, if other than the date of filing: 10/04/2023 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 645.020 More; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Dated 0-10-05 4 th 2023 Squardre of a member or authorized representative of a member		ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The 90th day after the ord is filed. Dated		
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Dated October 4th 2023.	Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	he recor	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
	Dated	October 4th 2023
Signature of a member or authorized representative of a member		
		Signature of a member or authorized representative of a member