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COVER LETTER

Division of Corporations						
CHDIECT.	1031 EXCHANGE REALTY, LLC					
SUBJECT:	Name of Limited Liability Company					
The enclosed	I Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	endence concerning this matter	to the following:			
		Richard Harding				
		****	Name of Person			
		1031 Exchange Realty, LI	.c			
			Firm/Company			
		3900 SW 145th Terrace				
	Address					
		Miramar, FL 33027				
	City/State and Zip Code					
mhowell@alphacpas.com						
			to be used for future annual report notif	lication)		
For further u	niormation c	oncerning this matter, please c	all:			
Richard Har	ding		305 497-5001 at ()			
	Name o	f Person		e Telephone Number		
Enclosed is a	a check for th	ne following amount:				
≘ \$25.00 I	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	iling Addres		Street Address: Registration Sec	ction		

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

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

1031 EXCHANGE REALTY, LLC

2023 HAY 31 AH 8: 09

(Name of the Limited Liability Cor (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)		
The Articles of Organization for this Limited Liability Comparing Florida document number 1.22000138721	any were filed on 03/21/2022 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited I	<u>iability company here</u> :		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	3900 SW 145th Terrace		
(Principal office address MUST BE A STREET ADDRESS	Miramar, FL 33027		
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 here: Name of New Registered Agent:	Miramar, FL 33027 ce address on our records, enter the name of the new registered		
2000 CW 1	45th Terrace		
New Registered Office Address: 3900 SW 14	Enter Florida street address		
Miramar			
	Cuy Zip Code		
New Registered Agent's Signature, if changing Registered Age	ent:		
provisions of all statutes relative to the proper and compl	as provided for in Chapter 605, F.S. Or, if this document is		

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>	Address	Type of Action
			Remove
			□Add
			□Remove
			☐ Change
	<u> </u>		
			□Remove
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	ust be specific and cannot be prior to date of f block does not meet the applicable statut	(optional) iling or more than 90 days after filing.) Pursuant to 605.0207 (3)(b ory filing requirements, this date will not be listed as the
If the record specifies a delayed effect record is filed.	ive date, but not an effective time, at 12:	01 a.m. on the earlier of: (b) The 90th day after the
Dated May 25th	2023	
	Richard Hardry	
	Signature of a member or authorized repre	

Filing Fee: \$25.00

Typed or printed name of signee