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	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	s to Filing Officer:	!
	J. HORNE	
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2022 JUN 20 PH 4: 00

SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AMRES REALTYAND INVESTMENTS, LLL 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:
DARLAY JOSEPH
AHRES REALTY AND INVESTMENTS, CLC
SS69 PINES BLVD SUITE 203
City/State and Zip Code JOSEPH - danley eyahoo. Can E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DAPLAY JOSEPH at 954 478-376 Name of Person at 954 Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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

FILED

2022 JUN 20 PM 4: 00

AMRES REALTY AN (Name of the Limited Liability C) (A Florida Lir	Company as it now appears on our records.) Company as it now appears on our records.) Company as it now appears on our records.)
The Articles of Organization for this Limited Liability Com Florida document number <u>L 2200017171</u> .	spany were filed on 14/11/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l 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 ADDRES	S(S)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	. Florida
Now Danietarad Agant's Signatura if shanging Danietarad A	City Zip Code
New Registered Agent's Signature, if changing Registered A	<u>gent.</u>

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>	Address	Type of Action
MOR	JEAN BERN	ARD LABOUSIÉRE 7607 DILIPO G HIBANITA, FL 330	BLVD DANG
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(If an effective Note: If the	date, if other than the date of filing:
he record sp ord is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	6/20/20
	Signature of a member or authorized representative of a member
	- // '

Filing Fee: \$25.00