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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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T. MATTHEWS
JUL 28 2022

## **COVER LETTER**

| TO:             | Registration Se<br>Division of Cor |  |   |  |
|-----------------|------------------------------------|--|---|--|
| SUBJEC          |                                    | Real Estate Ventures II LLC                  |   |  |
| SOBJEX          | <u></u>                            | Name of Lim                                  | ited Liability Company  |  |
| The encl        | osed Articles of                   | Amendment and fee(s) are sub                 | mitted for filing.  |  |
| Please re       | eturn all correspo                 | ondence concerning this matter               | to the following:   |  |
|                 |                                    | Oscar E. Soto                                |   |  |
|                 |                                    |  | Name of Person  |  |
|                 |                                    | The Soto Law Group P.A.                      |   |  |
|                 |                                    | <del></del>                                  | Firm/Company  |  |
|                 |                                    | 2400 E. Commercial Blvd.                     | Suite 400   |  |
| Address         |                                    |  |   |  |
|                 |                                    | Fort Lauderdale, FL, 3330                    | 8   |  |
|                 |                                    | <u> </u>                                     | City/State and Zip Code   |  |
|                 |                                    | oscar@sotolawgroup.com                       | to be used for future annual report notific                         | cation   |
| For furth       | ner information c                  | oncerning this matter, please ca             |   | Carony   |
| Scott M         | oore                               |  | 954 567-1776  |  |
|                 | Name o                             | f Person                                     | Area Code Daytime   | Telephone Number   |
| Enclosed        | I is a check for th                | ne following amount:                         |   |  |
| <b>≡ \$</b> 25. | 00 Filing Fee                      | ☐ \$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) |
|                 | Mailing Addres Registration S      |  | Street Address:<br>Registration Sect                                | tion   |

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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 SECRETARY OF STATE DIVISION OF CORPORATIONS

22 MAY 24 AM 10: 58

| Hermanns Real Estate Ventures II LLC   |  |  |  |
|--|--|--|--|
| ( <u>Name of the Limited Liability Compar</u><br>(A Florida Limited L  | iv as it now appears on our reco<br>lability Company)  | ords.)   |  |
| The Articles of Organization for this Limited Liability Company of Elorida document number L22000185363  | were filed on 4/18/2022                                | and assigned   |  |
| This amendment is submitted to amend the following:  |  |  |  |
| A. If amending name, enter the new name of the limited liabil  | lity company here:                                     |  |  |
| The new name must be distinguishable and contain the words "Limited Liabili  | ty Company," the designation "L                        | I.C" 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 adapted and/or the new registered office address here:  | ddress on our records, <u>ent</u>                      | er the name of the new registered                          |  |
| Name of New Registered Agent:  |  |  |  |
| New Registered Office Address:   | Enter Florida street ada                               | lress  |  |
|  | , Florida  |  |  |
|  | City   | Florida<br>Zıp Code  |  |
| New Registered Agent's Signature, if changing Registered Agent:  |  |  |  |
| I hereby accept the appointment as registered agent and agre<br>provisions of all statutes relative to the proper and complete p<br>accept the obligations of my position as registered agent as p<br>being filed to merely reflect a change in the registered office of<br>company has been notified in writing of this change. | performance of my duties,<br>rovided for in Chapter 60 | and I am familiar with and 5, F.S. Or. if this document is |  |

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>                        | Address                  | Type of Action |
|--------------|------------------------------------|--------------------------|----------------|
| MGR          | Hermanns Real Estate Ventures, LLC | 3633 Bayshore Blvd. NE   |                |
|              |                                    | St. Petersburg, FL 33703 | □Remove        |
|              |                                    |                          | □Change        |
| MGR          | Richard F. Hermanns                | 3633 Bayshore Blvd. NE   | □Add           |
|              |                                    | St. Petersburg, FL 33703 | = Remove       |
|              |                                    |                          | □Change        |
|              |                                    |                          | □Add           |
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| Effectiv               | ve date, if other th                  | ian the date of filir    | ng:                                    | <u></u>                | (opti                 | i <b>onal)</b><br>r filing.) Pursuant to 605 |       |
| n an ene<br>Note: 1    | ctive date is listed, the             | date must be specific at | nd cannot be prior t                   | o date of filing or mo | ore than 90 days afte | r filing.) Pursuant to 605                   | .0207 |
| docume                 | nt's effective date of                | on the Department of     | -meet the applica<br>'State's records. | pie statutory titing   | requirements, th      | s date will not be liste                     | ed as |
|                        |                                       |                          | 2.000                                  |                        |                       |  |       |
|                        |                                       |                          |  |                        |                       |  |       |
| e record<br>rd is file | specifies a delayed.                  | effective date, but no   | of an effective fin                    | ne, at 12:01 a.m. o    | n the earlier of: (I  | <ul><li>The 90th day after</li></ul>         | r the |
| ra in me               | .u.                                   |                          | /                                      |                        |                       |  |       |
| Ŋ                      | May 19                                |                          | 2022                                   | -                      |                       |  |       |
| Dated _                |                                       |                          |  | _ ·                    |                       |  |       |
|                        |                                       | 777                      |  | <del>-</del>           |                       |  |       |
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Typed or printed name of signee