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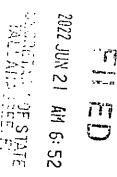
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A. BUTLER SEP - 9 2022

COVER LETTER

TO: Registration So Division of Cor		4	•
SUBJECT: Cox Real E	state Group, LLC		
TOBILOT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Lloyd Cox		
		Name of Person	
		Firm/Company	
	1300 Brickell Bay Drive #	1711 Address	
	Miami, FL 33131	Address	
		City/State and Zip Code	
	lloyd@coxreg.com E-mail address: ()	o be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca	all:	
Lloyd Cox		at (305) 502-8342 Area Code Daytime	
Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$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 tadditional copy is enclosed
Mailing Addres	<u>s:</u>	Street Address:	
Registration Section		Registration Sec	tion

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 ARTICLES OF ORGANIZATION ED

Cox Real Estate Group, LLC2022 JUN 21 AM 6: 52

Name of the Limited Liability Company is it now appearyun our records: STATE (A Florida Limited Liability Company) A Light SEE, FL	(Name of the Limited Liability Compar (A Florida Limited L	ny avit now appears on our	records F STATE
The Articles of Organization for this Limited Liability Company were tiled on	(A Constanting 1)	addity Company 1 24 1 2	I'- IBEE, FL
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 "LLC." 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) 3. If amending the registered agent and/or registered office address on our records, enter the name of the new registered address here: Name of New Registered Agent: New Registered Office Address:	The Articles of Organization for this Limited Liability Company	were filed on	722722 and assigned
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New Registered Office Address:	gent and/or the new registered office address here:		
New Registered Office Address:			
New Registered Office Address:	Name of New Registered Agent:		
Enter Florida street address	New Registered Office Address:		
		Enter Florida street	address
. Florida			. Florida
City Florida Zip Code		City	Zip Code

Thereby 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
MGR	Marlon Cox	1300 Brickell Bay Drive #1711	
		Miami, F1, 33131	□Remove
			☐ Change
-			
			□Remove
			□Change
			□Remove
			□ Change
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Signature of a member or authorized representative of a member			Lloyd Cox
		Signature	of a member or authorized representative of a member
	·		Typed or printed name of signee

Filing Fee: \$25.00