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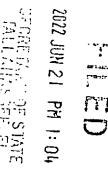
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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Shore2Shor	re Realty 2 🔒			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Tina Scarbrough			
		Name of Person		
	Shore2Shore Realty 2			
		Firm/Company		
	401 N Wickham Rd unit N	I		
	<del> </del>	Address		
	Melbourne FL 32935			
	-14	City/State and Zip Code		
	soldbytinas@gmail.com			
	E-mail address; (	to be used for future annual report not	ufication)	
For further information c	oncerning this matter, please c	all:		
Fina Scarbrough		321 290-6733		
Name	f Person	at () Area Code Daytin	ne Telephone Number	
Mille o	i reison	Afea Code Dayth	ne reiephone Number	
Enclosed is a check for the	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 (additional copy is enclosed)	
Mailing Addres Registration 5		<u>Street Address:</u> Registration Se	ection	
Division of Corporations		Division of Co	rporations	
P.O. Box 632		The Centre of		
Tallahassee, FL 32314		2410 N. MONTO	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT . TO ARTICLES OF ORGANIZATION OF

FIED

Shore2Shore Realty 2

(Name of the Limited Liability Company as it now appears on 6477 courts 2 | PF |: 05

The Articles of Organization for this Limited Liability Company	5.1/7	OP STATE	
The Articles of Organization for this Limited Liability Company	were filed on	TALLAHASSE and assign	ned
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company " the des	esionation "LLC" or the abbreviation "L.L.	C."
The new hame throat the distriguishable and contain the words. Existing that	ny company: die des		
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)			
(Mailing gauress MAT BE A FOST OFFICE BOX)	<del></del>		
B. If amending the registered agent and/or registered office	addrass on our rac	acords, anter the name of the new	register
agent and/or the new registered office address here:	address on our rec	ettorus, enter the name of the new	<u>CE</u> ISICI
Name of New Boolstored Agents			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florid	ida street address	
		, Florida	<del></del>
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>		
I hereby accept the appointment as registered agent and agr	ree to act in this co	vanacity. I further agree to comply	e with t
provisions of all stanues relative to the proper and complete			

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>	<u>Address</u>	Type of Action
MGR	Tina Scarbrough	2791 Snapdragon dr NW Palm Bay FL 32907	
			□Remove
			□Change
<del></del>			□Add
			Петюve
			□Change
			□Add
			ПRепюче
			□Change
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		□Remove	
			□Change
		⊐Rепюve	
			□Change
		<u> </u>	□Add
			ПRепюче
			□ Change

D. If amendin	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
_	
Note: If the	te, if other than the date of filing:
If the record spec record is filed.	rifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
6 2 20	
Dated	المنات
_	Signature of a member or authorized representative of a member
T	ina Scarbrough
_	Typed or printed name of signee