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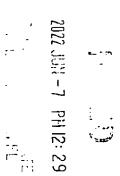
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COVER LETTER

TO: Registration Section

Division of C	Corporations		
Sue Lee SUBJECT:	Realty LLC		•
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	bmitted for filing.	
Please return all corre	spondence concerning this matter	r to the following:	
	Sulem Thomas		
		Name of Person	
	Suc Lee Realty LLC		
		Firm Company	
	1913 Quail Ct		
		Address	
	Fort Pierce, FL	34982	
		City/State and Zip Code	
	dsincometaxservices/a com		
		eto be used for future annual report not	iñeanou)
For further information	reoncerning this matter, please c	rall:	
Daniel Morales		772 807-1678	
Nam	e of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check fo	r the 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)
<u>Mailing Addi</u> Registration	n Section	<u>Street Address:</u> Registration Se	ection
Division of P.O. Box 6	Corporations	Division of Co The Centre of '	-
	527 F. FL 32314		rananassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 JULY -7 PH 12: 29 Sue Lee Realty LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) TAL 05/06/2022 The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number 1.22000214713 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Sulem Lee LLC 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 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

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

___, Florida ___

· 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
			□Remove
			LIRemove
			L'Add
			□Remove
			□Remove
			_ Change
			<u></u>
			LJRemove
			□Remove
			□ Change

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fective date, if other than the an effective date is listed, the date muote: If the date inserted in this becament's effective date on the E	lock does not me	et the applical	date of filing or de statutory fi	more than 90 da ing requiremen	ys after filing.) its, this date v	Pursuant to 605.02 fill not be listed :
record specifies a delayed effects is filed.						90th day after th
ated May 31. ————————————————————————————————————		2022				
n. J	\$7					
	12homa	A A-				
- Sulem I	Signature of a me	mber of author	ized representat	ve of a member		