

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
	_	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
·	-	
	J. H	IORNE
	NFC	1 1 2024
 		

Office Use Only



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COVER LETTER

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
SURINCE GIROL	BERProperties	LLC	
30BJEC1:	Name of Lim	ned Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please return all correspo	ndence concerning this matter	to the following:	
	Amy JOB	nen	
		Name of Person	
		Firm/Company	
	2100 Jack	son Heights Drive	
		Address	
	SebnngiFl	- 33870	
		City/State and Zip Code	^
	E-mail address:	City/State and Zip Code erties.info@gmail. con to be used for future annual report notification)	']
For further information c	oncerning this matter, please co		
Amy T A	10 6 2 5	786 260 4005	
Name o	f Person	at (786) 260 4905 Area Code Daytime Telephone Number	
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	te of Status &
Mailing Address		Street Address: Registration Section	
Registration S Division of C		Division of Corporations	
P.O. Box 632	.7	The Centre of Tallahassee	1.0
Tallahassee, l	FL 32314	2415 N. Monroe Street, Suite 8	IU

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

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Grober Properties LLC	SEGRETAL FESTATE
(Name of the Limited Liability Company as it now appears on our records.)	
(A Florida Limited Liability Company)	

The Articles of Organization for this Limited Liab	ility Company	were filed on 0	6/08/2022	and assigned
Florida document number <u>L 2200026</u>	2726		·	
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	he limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and contain the word	LC ds "Limited Liabi	ity Company," the des	ignation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicab			<u> </u>	
(Principal office address MUST BE A STREET)	<u>ADDRESS)</u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u>0X)</u>			
B. If amending the registered agent and/or reg agent and/or the new <u>reg</u> istered office address I	here:			
Name of New Registered Agent:	NA			
New Registered Office Address:		Enter Florid	la street address	
			, Florida	
				Zip Code
New Registered Agent's Signature, if changing Reg	-			
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registed being filed to merely reflect a change in the region company has been notified in writing of this change in the region of the r	and complete ered agent as p gistered office	performance of n provided for in Cl	ny duties, and I am fa napter 605, F.S. Or, ij	miliar with and this document is
	If Chai	nging Registered Age	nt, Signature of New Regi	stered 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
	NA		□ Add
			□ Remove
			□Change
			□Add
			□ Remove
			Change
			□Add
			□Remove
			
			□Remove
			□ Change
			□Add
			□Remove
			_Add
			Remove
			□ Change

NA 			
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			<u> </u>
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Effective date, if other than the d	late of filing:	(optior	nal)
Effective date, if other than the date (If an effective date is listed, the date must Note: If the date inserted in this bloom	ne specific and cannot be prior to date	of filing or more than 90 days after fi	ling.) Pursuant to 605,0207 (3)
document's effective date on the Dep		autiory thing requirements, this c	inte with not be hated as the
the record specifies a delayed effective cord is filed.	date, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90th day after the
DECEMBER 5	2024	. 0	
Dated		and Ohm	
	C	uns Obur (
	ignature of a member or authorized r	representative of a member	
AMY J O'BRIEN			
	Typed or printed nam		