## L22000270789

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## **COVER LETTER**

TO:	Registration Solivision of Col		ν	
CUDIE/		EMIREL REALTOR, LLC	<b>₩</b>	
SUBJEC	-1; <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:	
		DENIZ DEMIREL		
			Name of Person	
		DENIZ DEMIREL REAL	TOR, LLC	
			Firm/Company	<del> </del>
		17633 ESPRIT DR		
			Address	<del></del>
		TAMPA, FL 33647		
			City/State and Zip Code	<del></del>
		AAHMED@NATIONWID		
For furth	er information o	e-mail address: (concerning this matter, please co	to be used for future annual report i all:	iottheation)
DENIZ	DEMIREL		813 586-1065	
	Name o	of Person	at () Area Code Day	time Telephone Number
Enclosed	l is a check for t	he 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	<del>_</del>	Street Address	-
	Registration Division of C		Registration Division of C	
	P.O. Box 632			f Tallahassee

Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

DENIZ DEMIREL REALTOR, LLC

ES SER I MILLER (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 Liability Company wer	re filed on 06/14/2022	and assigned
Florida document number L22000270789		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
DENIZ DEMIREL LLC		
The new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "LL	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:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office add	ress on our records, ente	r the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street addre	ier -
	City , F	lorida
	CHY	zip Coae
	·	
New Registered Agent's Signature, if changing Registered Agent:		

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
			□Add
			□Remove
		<del></del>	Change
			□ Add
			□Remove
			Change
			□Add
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	<u> </u>
<del></del> -	
Note: If the	ate, if other than the date of filing:  date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02s date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a effective date on the Department of State's records.
e record spe rd is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after th
Dated AUC	GUST 21 2023
	Signature of a member or authorized representative of a member
Į.	DENIZ DEMIREL  Typed or printed name of signee