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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO: Registration Section Division of Corpor			
SUBJECT:	Chenbiry Name of Lim	Realty JJC	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Am	endment and fee(s) are sub	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	Cher	Name of Person  White Realty.  Firm/Company	JJC
	13973	SW 87H TER	PACE_
-	Yine+ (C	City/State and Zip Code  One fath realty to be used for future annual report notific	84 CO():
For further information conc	Monterci	at (786) 541 42	267 Telephone Number
Enclosed is a check for the fo	ollowing amount:		
Ø \$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 Address:		Street Address:	

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 TO ARTICLES OF ORGANIZATION OF

	2000
Cherubin	Realty JJC 2022 AUG 10 PM 1:01
(Name of the Limited Lia (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liability	ty Company were filed on 7/11/22 and assigned
Florida document number <u>L220003064</u>	65.
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the li	7) 11(
he new name must be distinguishable and contain the words "I	'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 AD	ODRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registe agent and/or the new registered office address here	ered office address on our records, enter the name of the new regist
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

## 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 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
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an effective date ote: If the dat	is listed, the dat e inscrted in th	n the date of the must be specificated the thick does the Department	c and cannot l not meet the	applicable s	of filing or me tatutory filing	re than 90 day	(optional) ys after filing.) ts, this date v	Pursuant t vill not be	o 605.02( e listed a
ecord specified is filed.	s a delayed eff	fective date, but	t not an effe	ctive time, a	12:01 a.m. o	n the earlier	of: (b) The	90th day	after the
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