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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 : (844)449-3624 Phone : (512)597-0678 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COVER LETTER

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cuio meca	MXR Realig	y LLC		
SUBJECT	;	Name of Lim	lied Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
		indence concerning this matter		
		Jonathan Taboada		
			Name of Person	
		ZenBusiness (NC		
			Firm/Company	
		336 E. College Ave Suite	301	
			Address	
		Tallahassee, FL 32301		
			City/State and Zip Code	<u></u>
		fulfillment@zenbusiness.co		
		h-mail address: (to be used for future annual report noti	lication)
For further	information c	oncerning this matter, please ca	all:	
c/o ZenBu	siness INC		844 493-6249	
	Name o	l'Person		c Telephone Number
Enclosed is	a check for th	ne following amount:		
€ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ailingAddres		StreetAddress: Registration Soc	etion
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.	O. Box 632	7	The Centre of T	allahassee
T:	illahassee. I	91, 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

Page: 3 of 5

To:

2024-05-03 11:28:19 UTC+14

18506176383

From: ZenBusiness User

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H240001615373

(Name of the Limited Linbility Compa (A Florida Limited	my as it now appears on our records.) Hability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L22000350838	were filed on <u>05/02/2024</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company." the designation "14.C" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	22089 Blazing Star Run	
(Principal office address MUST BE A STREET ADDRESS)	Land O Lakes, FL 34637	
THE DUTTE WHITESS WEST DE A STREET ADVINGARY	Hillsborough CountyUS	
	22600 01-1-1-1-1-1	~ ~
Enter new mailing address, if applicable:	22089 Blazing Star Run Land O Lakes, FL 34637	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	Hillsborough CountyUS	
	THIS DOLOUGH COURT CO	
**	address on our records, <u>enter the</u>	ರು ೧೨ ೧೨ ೧೨
Name of New Registered Agent:	address on our records, <u>enter the</u>	5: 5
spent and/or the new registered office address here:	address on our records, <u>enter the</u> Enter Floridastreet address	5: 2
• •		2: 58

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

To:

H24000161537.3

<u>Title</u>	Name	Address	Type of Action
AMBR	Robert Baute	22089 Blazing Star Run	
		Lund O Lukes, FL 34637	□Remove
		US	■Change
AMBR	GARTH-CLAYTON, SHEENA	22089 Blazing Star Run	
		Lund O Lokes, FL 34637	
		US	
			🖸 Add
			□ Remove
			□ Change
			bbk□
		· · · · · · · · · · · · · · · · · · ·	Remove
			□Change
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			☐ ☐ Change
			□Add
			□Remove
			□ Change

Īo:

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D. Ifame	ending any other informs	ation, enter change(s) here:	(Attach additional sheets,	if necassary.)
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Note:	If the date inserted in this b	e date of filing: st be specific and cannot be prior to lock does not meet the applical Department of State's records.	ble statutory filing requiremen	(optional) ys after filing.) Pursuant to 605.0207 (3)(nts, this date will not be listed as the
If the recor record is ti		ve date, but not an effective tim	ne, at 12:01 a.m. on the earlie	r of: (b) The 90th day after the
Dated	06/15	2023	_ ·	
	/s/Crystal Garth			
	Ciystal Garth, Member	Signature of a member or author	nzen representative of a member	
		Typed or printee	I name of signee	