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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE REAL TITLE GREAT LAKES, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

T. LEMIEUX

FEB - 5 2024

14154847068

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

THE REAL TITLE GREAT LAKES, LLC	
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000409145</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	350 Lincoln Road, Floor 2, Unit #351
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33139
Enter new mailing address, if applicable:	PO BOX 530316
(Mailing address MAY BE A POST OFFICE BOX)	Atlanta, GA 30353-0316
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new registered
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 agr provisions of all statutes relative to the proper and complete	Cuy Florida 72 Code 72

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
MGR	DALY, SEAN	400 NW 26TH ST	🗀 Add
		MIAMI, FL 33127 UN	X]Remove
			DChange
Member One Real Title Inc	One Real Title Inc	350 Lincoln Road, Floor 2, Unit #351	X lAdd
	Miami Beach, FL 33139	□Remove	
		□Change	
		□Add	
		[]Remove	
		DChange	
		□Add	
		□Remove	
		□Change	
		🗆 Add	
		□Remove	
		[] Change	
			□Add
			□Remove
			Change

D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note: 1	e date, if other than the date of filing:
the record	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the
Dated _	February 2 . 2024 .
	/s/ Caitlin Lazarus Signature of a member or authorized representative of a member
	Caitlin Lazarus, Attorney-in-Fact
	Typed or printed name of signee