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COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Servision of Cor			•
	e Properties LLC		
30b36C1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jeremy Porter		
		Name of Person	
	Porterhouse Properties LL	С	
		Firm/Company	
	14227 Bluebird Park Road		
		Address	
	Windermere, FL. 34786		
		City/State and Zip Code	<u>.</u>
	jeremyleeporter l@gmail.co		
For further information of	E-mail address: (concerning this matter, please co	to be used for future annual report not all:	ification)
Jeremy Porter		407 608-9060	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration		Street Address: Registration Se	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 0 CT 27 PM 5: 23

Porterhouse Properties LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.)	
(A Florida Limited I	Hability Company)	
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number 1.22000464561		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	Bity Company," the designation "LLC" or t	he 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:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office:	address on our records, enter the	name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid:	Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr	ee to act in this capacity. I further	r 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 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>	<u>Address</u>	Type of Action
	Jenese Porter	6976 Church Lake Street	
		Groveland, FL. 34736	 ≅ Remove
			Change
			□Add
			□ Remove
			□ Change
			□Remove
			Remove
			□ Add
			Remove
			□Change
			□Remove
			Change

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