L22 000 520 753

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

	registration Se Pivision of Cor				
CHD IE	REAC LLC	2			
SUBJECT	l; <u></u>	Name of Lim	ited Liability Company		
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please rett	ırn all correspo	ondence concerning this matter	to the following:		
		Brian Dolan			
			Name of Person		
		REAS LLC			
			Firm/Company		
		1440 Waterway Cove Dr			
		····	Address		•
		Wellington, FL 33414			٠,
			City/State and Zip Code		
		bdolan585@gmail.com			
		E-mail address: (to be used for future annual report	rt notification)	
For further	r information c	oncerning this matter, please c	all;		:
			at ()		
	Name o	f Person	at () Area Code D	aytime Telephone Number	
Enclosed i	s a check for th	ne following amount:			
₩ \$25.04	0 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified	e of Status &
	failing Addres		Street Addre Registration		
Registration Section Division of Corporations		_	Corporations		
P	O. Box 632	.7	The Centre	of Tallahassee	
Т	'allahassee, l	FL 32314	2415 N. Mo	onroe Street, Suite 8	10

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REAS, ELC		
(Name of the Limited Liability Com (A Florida Limite	ipany as it new appears on our recorded Liebility Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Compar	ny were filed on 12/12/2022	and assigned
Florida document number L22000520753		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:	
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	
(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 offic agent and/or the new registered office address here:	e address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	5
	, Fk	orida
	Citv	Zip Code

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 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>	Name	Address	Type of Action
AMBR	Brian Dolan	1440 Waterway Cove Dr, Wellington, FL 33414	🖹 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			DChange
			 □Add
			Remove
			! □Change
			🗆 Remove
			□Change
		<u></u>	□Add
			□Remove
			□Change
			DAdd
			🗆 Remove
			□ Change

amending any other intorma	ation, enter change(s) here: (Attach	additional sticets, if the cessary.)	
	<u>,</u>		
			•
<u></u>			
		<i>,</i> -	
			•
fective date, if other than the neffective date is listed, the date munter. If the date inserted in this becament's effective date on the E	lock does not meet the applicable statute	(optional) ling or more than 90 days after filing.) Pursuant to 605 ory filing requirements, this date will not be liste	i.02 ed :
ecord specifies a delayed effecti is filed.	e date, but not an effective time, at 12:0	01 a.m. on the earlier of: (b) The 90th day afte	r th
ted January 26	2023		
	R		
	Signature of a member or authorized repre-	cuntative of a member	
	Signature of a member of authorized repre-	semante of a nemoci	

Filing Fee: \$25.00