L23000013778

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DocuSign Envelope ID: D0C9C8D6-33D7-46FC-BCDD-41F98CFC4388 COVER LETTER TO: Registration Section Division of Corporations Zehren Real Estate Holdings LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Kimberly Zehren Name of Person Firm/Company 758 Stonebridge Ave. Address Onalaska WI 54650 City/State and Zip Code pkzehren@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kimberly Zehren 612 207-2807 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ■ \$25,00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 роспојан Епуејоре го. рососоро-зори-46FC-всрр-41F98CFC4388

ARLICLES OF AMENDMENT

ARTICIDES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Zehren Real Estate Holdings LLC					
(Name of the Lin	ited Liability Compa (A Florida Limited	any as it now appears on our records. Liability Company))		
The Articles of Organization for this Limited Florida document number <u>L23000013778</u>	Liability Company	were filed on January 5, 2023	and assigned		
This amendment is submitted to amend the fo	llowing:				
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 Liabi	lity Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		758 Stonebridge Ave			
(Principal office address MUST BE A STRE	ET ADDRESS)	Onalaska WI 54650			
Enter new mailing address, if applicable:		758 Stonebridge Ave			
(Mailing address MAY BE A POST OFFICE BOX)		Onalaska WI 54650			
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office : ess here:	address on our records, enter tl	ne name of the new register		
Name of New Registered Agent:	Kimberly Zehre	en			
New Registered Office Address:	954 Sand Castle	e Rd			
		Enter Florida street address	: (-		
	Sanibel	Flor	ida <u>33957</u>		
		City	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

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II amending Authorized rerson(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	1034 Reverse Exchange Co LLC	15671 San Carlos Blvd 101	□Add
		Ft Myers FL 33908	<u> </u>
			□Change
MGR	Kimberly Zehren	758 Stonebridge Ave	≡ Add
		Onalaska WI 54650	□Remove
			□Change
			□Add
			□Remove
			□Change
			
			□Remove
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Fective date, if other than a fective date is listed, the date is listed in setted at each or a fective date on the setted in	this block does not meet the	re applicable statute	ling or more than 90 days	optional) after filing.) Pursuant to 60 s, this date will not be lis	5.020 ⁻ ted as
ecord specifies a delayed e is filed.	Tective date, but not an ef	fective time, at 12:0	Ω a.m. on the earlier ϵ	of: (b) The 90th day afte	er the
July 20 ted	202	?3			
ted July 20	Doeusigned by:	23 Yn auses.			
ted July 20	Doeusigned by: Juenesa M OF117D05C0824D	23 Knower 2	sentative of a member		

Filing Fee: \$25.00