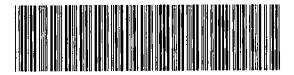
## L23 000 022 827

(Requestor's Name)
(Address)
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02/01/23--01020--003 \*\*25.00

## **COVER LETTER**

**Registration Section** 

Tallahassee, FL 32314

TO:

Division of Cor	porations		
SUBJECT: Alicia J Ho	llis Realtor LLC		
SUBJECT: Michay 110	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Rick Hollis		
		Name of Person	
		Firm/Company	<del></del>
	221 Santa Rosa Blvd		
	ZZT Saina Rosa STVS	Address	3
	Core Walton Dorole		Dort notification)  1134  Daytime Telephone Number  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  ress: ion Section of Corporations
	Fort Walton Beach	City/State and Zip Code	<del>-</del>
	rickhollis@gmail.com		
		to be used for future annual report not	ification)
For further information co	oncerning this matter, please ca	all:	
		850	• •
Rick Hollis Name o	č D	at ( <del>580 -</del> ) 244-1134 Area Code Davtin	na Tulanhana Number
Name o	rerson	Area Code Dayun	te retephone istantoer
F 1 1 1 1 2 4	C-11		
Enclosed is a check for th	ie ionowing amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Mailing Addres	s:	Street Address:	
Registration S	Section	Registration Se	
Division of C	-		-
P.O. Box 632	1	The Centre of T	i aiianassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Alicia J Hollis Realtor		
(Name of the Limited Liability Co) (A Florida Limi	mpany as it now appears on our recorted Liability Company)	<u>(ds.)</u>
The Articles of Organization for this Limited Liability Compa	any were filed on 01/10/2023	and assigned
Florida document number L23000022827		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company." the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
<u> Principal office address MUST BE A STREET ADDRESS</u>	<u> </u>	
		,
Enter new mailing address, if applicable:		<u></u>
Mailing address MAY BE A POST OFFICE BOX)		
		<u>.</u> .
3. If amending the registered agent and/or registered offigent and/or the new registered office address here:	ce address on our records, <u>ente</u>	r the name of the new registe
zent and/or the new registered office address neve		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	ess
_	, F	lorida
<del></del>	City	Zıp 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>	<u>Name</u>	Address	Type of Action
MGR	Stephen Hollis	3B Chestnut Ave SE	<b>=</b> Add
		Fort Walton Beach, FL. 32548	□Remove
			□Change
AMBR	Rick Hollis	221 Santa Rosa Blvd.	□Add
		Fort Walton Beach, FL. 32548	Remove
			□ Change
	<del></del>		□Add
			□Remove
		<del></del>	Change
			□Remove
			Change
			□Add
			□Remove
			□ Change
			□Remove
			□ Change

	Add / Change Rick Hollis from AMBR to MBR			
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Fffect	rive date if other than the date of filing:		(op	tional)
(If an ef:	rive date, if other than the date of filing: fective date is listed, the date must be specific and cannot l	be prior to date of filing	or more than 90 days af	ter filing.) Pursuant to 605.0207
Note:	If the date inserted in this block does not meet the	applicable statutory	filing requirements, t	his date will not be listed as
docum	nent's effective date on the Department of State's re	ecoras.		
	rd specifies a delayed effective date, but not an effe	ctive time, at 12:01	a.m. on the earlier of:	(b) The 90th day after the
ord is fi	iled.			
Dated	01/26/2023			
		or authorized represen	tative of a member	

Typed or printed name of signee