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COVER LETTER

TO: Registration Se Division of Cor			
REH Invest	ors LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	AngeliaL.Conyers		
		Name of Person	
	REH Investors LLC		
		Firm/Company	
	5860 Granite Ln		
		Address	
	Cocoa, FL 32927		
		City/State and Zip Code	
	rehinvestorsfle@gmail.com E-mail address: (to be used for future annual report notific	ration)
For further information c	oncerning this matter, please ca		
Angelia L. Conyers		321 522-8206	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S		Street Address: Registration Sect	ion
Division of C		Division of Corp	

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REH Investors LLC		
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Compan	pears on our records.) y)	
The Articles of Organization for this Limited Liability Company were filed on	2/23/2023	and assigned
lorida document number		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company	here:	
REH Innovators LLC		
he new name must be distinguishable and contain the words "Limited Liability Company," t	he designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		- Martin - 1
Principal office address MUST BE A STREET ADDRESS)	<u> </u>	2021
	-	
		<u> </u>
	7.5 c 0.0 c	9
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	.''. ਜਿਵਾਂ	<u> </u>
up		<u> </u>
 If amending the registered agent and/or registered office address on our gent and/or the new registered office address here: 	ir records, <u>enter the name</u>	of the new regist
Name of New Registered Agent:		201
New Registered Office Address:		
	Florida street address	
	. Florida	
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

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
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			Пенюче
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an effective date lote: If the dat	f other than the date of s listed, the date must be spec inserted in this block does tive date on the Departme	ific and cannot be pri s not meet the appl	licable statutory film	(opti nore than 90 days after ng requirements, thi	filling.) Pursuant to 605.	,020) ed as
e record spe The 90th da	cifies a delayed effect y after the record is	tive date, but r filed.	not an effective	time, at 12:01	a.m. on the earlie	er o
ated	February	5 2024	· ·			
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	Signatur	re of a member or au	thorized representativ	e of a member		