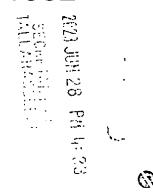
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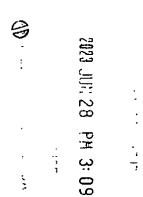
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|---------------------------|--------------------------|
| (| Requestor's Name) |
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| | A.J. |
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| PICK-UP | ☐ WAIT ☐ MAIL |
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| (| Business Entity Name) |
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| Certified Copies | Certificates of Status |
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| Special Instructions to F | Filing Officer: |
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| | J. HORNE |
| | J. HORNE JUN 2 8 2023 |
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| | Office Use Only |



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06/29/23--01001--013 **25.00



COVER LETTER

TO:

| TO: Registration Se Division of Cor | | |
|--|---|---|
| SUBJECT: AV | MCVICAN K Name of Limi | Realty Of PSL LLC ted Liability Company |
| The enclosed Articles of | Amendment and fee(s) are subt | nitted for filing. |
| Please return all correspo | ndence concerning this matter t | to the following: |
| | Daniel | Castared4 Name of Person |
| | American | Realty of PSL LLC |
| | 1980 SW | Baysnore Blvd Address |
| | port Sam | 17 WCIL FT 34984 City/State and Zip Code |
| | | o be used for future annual report notification) |
| For further information c | oncerning this matter, please ca | II: |
| Daniel Name o | Castaneda f Person | at (772) 200-5418 Area Code Daytime Telephone Number |
| Enclosed is a check for th | ne following amount: | |
| \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Addres Registration S | | Street Address: Registration Section |
| Division of C | orporations | Division of Corporations |
| P.O. Box 632 | | The Centre of Tallahassee |
| Tallahassee, I | FL 32314 | 2415 N. Monroe Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

AMERICAN REALY OF PSL MERING

| (Name of the Limited Liability Company as it now ap (A Florida Limited Liability Company) | pears on our records.) | | | | |
|--|---|--|--|--|--|
| The Articles of Organization for this Limited Liability Company were filed on Florida document number $\underline{L2300010239}$ | Organization for this Limited Liability Company were filed on 2127 2023 and assigned nt number L23000102392 | | | | |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the limited liability company | <u>here</u> : | | | | |
| The new name must be distinguishable and contain the words "Limited Liability Company," t | ne designation "LLC" or the 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 ou agent and/or the new registered office address here: | r records, enter the name of the new registered | | | | |
| N. CN. D | | | | | |
| Name of New Registered Agent: | | | | | |
| New Registered Office Address: Enter | Florida street address | | | | |
| | , Florida | | | | |
| City | , Florida Zip Code | | | | |
| New Registered Agent's Signature, if changing Registered Agent: | | | | | |
| I hereby accept the appointment as registered agent and agree to act in th | is 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 |
|--------------|----------------|--|----------------|
| 46R | Tina Castaneda | 308 Me Suffice Au port St Lucy Fr 3 | 1983 DAdd |
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| Note: If t | date, if other than the date of filing: 6.27.23 (optional) we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.03 he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed s effective date on the Department of State's records. |
|-------------|---|
| | becifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t |
| | |
| d is filed. | 6127 . 2023. |
| d is filed. | 6127 . 2023. |
| d is filed. | 6127 . 2023. Signature of a member or authorized representative of a member |