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COVER LETTER

TO:

TO: Registration So Division of Cor			
Strobeck Pr	operties LLC		
SUBJECT:			
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Pamela Strobeck		
		Name of Person	
		Firm/Company	
	7200 Creekwood Court		
		Address	
	Tampa, Fl. 33615		2023
	strobecklee@yahoo.com	City State and Zip Code	2023 APR 10
The Combine in Comment is a	E-mail address. (oncerning this matter, picase c	to be used for future annual report noti-	fication)
Lee Strobeck	oncerning this matter, picase c	an: 813 598-9869	무슨 표
Lee Showerk			1
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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		Street Address:	otian
Registration ! Division of C		Registration Sec Division of Cor	
Division of Corporations P.O. Box 6327		The Centre of T	•
Tallahassee.	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Strobeck Properties LLC.		
(Name of the Limited Liability C. (A Florida Lin	ompany as it now appears on our record ited Liability Company)	15,1
The Articles of Organization for this Limited Liability Comp. Florida document number	pany were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u> </u>	
Enter new mailing address, if applicable:	7200 Creekwood Court	100 AOR O
(Mailing address MAY BE A POST OFFICE BOX)	new mailing address, if applicable: ing address MAY BE A POST OFFICE BOX) Tampa, Fl. 33615	三二
B. If amending the registered agent and/or registered of agent and/or the new registered office address here: Name of New Registered Agent:	fice address on our records, <u>enter</u>	the name of the new registered
New Registered Office Address:	Enter Florida street addres	
<u></u>		orida
	$C\eta y$	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Lee Strobeck	4318 Joy Drive Tland O Lakes, FL, 34638	
			■Remove
			□Change
P	Pamela C Strobeck	4318 Joy Drive Land O Lakes, FL, 34638	□Add
MGR	Pamela C Strobeck	4318 Joy Drive Land O Lakes, FL. 34638	□ Change
			Add 2023 /Remove
			Change 1
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ective date, if other than the offective date is listed, the date in	ne date of filing: nust be specific and cannot be prior t	o date of filing or more than 90	(optional) days after filing.) Pursuant to 605	.020
te: If the date inserted in this	block does not meet the applica Department of State's records.			
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cord specifies a delayed effects filed.	tive date, but not an effective tin	ne, at 12:01 a.m. on the earl	ier of: (b) The 90th day after	r the
April 4th	2023			
ted	··			
.0.	mela Strubeek Signature of a member or author			
<i>¥</i>				