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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	TIAW [MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Division of	on Section Corporations		:
	Real Estate, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Article	es of Amendment and fee(s) are sub	mitted for filing.	
Please return all corr	respondence concerning this matter	to the following:	
	Nicole Albert		
		Name of Person	
	Albert Real Estate, LLC		
		Firm/Company	
	5800 Elegant Orchid Way		, ;
		Address	·
	Sarasota, FL 34232		· · · · · · · · · · · · · · · · · · ·
		City/State and Zip Code	
	nalbert.realestate@gmail.co		1 · ,
	E-mail address: (to be used for future annual report notification)	-1, (· · · · · · · · · · · · · · · · · · ·
For further informat	ion concerning this matter, please ca	all:	
Nicole Albert		941 914-1800 at ()	
Na	ime of Person	Area Code Daytime Telepho	ne Number
Enclosed is a check	for the following amount:		
■ \$25.00 Filing Fo	ce 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 Ac		Street Address:	
-	ion Section of Corporations	Registration Section Division of Corporation	ns
P.O. Box		The Centre of Tallahas	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

- ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Company as it now appears on our recor mited Liability Company)	rds.)
npany were filed on 03/06/2023	and assigned
d liability company here:	
d Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
co	
337	: :
	1
office address on our records, <u>ente</u>	r the name of the new regist
Enter Florida street addr	S.S.
r	florida
, r	Zip Code
	d liability company here: d Liability Company." the designation "LL SSS) Office address on our records, enter Enter Florida street address, in the street address.

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, 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
MGR	Jonathan Albert	5800 Elegant Orchid Way, Sarasota, FL 34232	≣Add
			□Remove
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effective date is listed, the date in	he date of filing:	iling or more than 90 days after filing.) P	ursuant to 605.020
	block does not meet the applicable statute Department of State's records.	ory filing requirements, this date wi	III not be listed a
	tive date, but not an effective time, at 12:	01 a.m. on the earlier of: (b) The 9	00th day after th
s filed.			
ed April 3	2023		
···			
\checkmark	100/1/1/10-		