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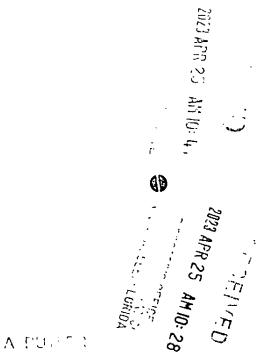
| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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## COVER LETTER

| Division of Cor             |   |   |  |
|-----------------------------|---|---|--|
|                             | al Estate, 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  | ondence concerning this matter            | to the following:   |  |
|                             | Lucas Louis Pappas                        |   |  |
|                             |   | Name of Person  |  |
|                             | Pappas Real Estate, LLC                   |   |  |
|                             |   | Firm/Company  |  |
|                             | 715 Wesley Avenue                         |   |  |
|                             |   | Address   |  |
|                             | Tarpon Springs, FL 34689                  |   |  |
|                             |   | City/State and Zip Code   |  |
|                             | lpappas@southernrb.com                    |   |  |
|                             | E-mail address: (                         | to be used for future annual report n                               | otification)   |
| For further information c   | concerning this matter, please co         | all:  |  |
| Lucas Pappas                |   | 727 224-3545<br>at ()   |  |
| Name o                      | of Person                                 | Area Code Dayt  | ime Telephone Number   |
| Enclosed is a check for the | he 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 Addres              | <u>ss:</u>                                | <u>Street Address:</u>  |  |
| Registration Section        |   | Registration S  |  |
| Division of C               |   | Division of C   |  |

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

| npany as it now appears of<br>ed Liability Company) | n our records.)  |
|---|--|
| any were filed on $\frac{3/23/2}{2}$                | and assigned   |
|   |  |
| iability company here:                              |  |
| ability Company," the desig                         | nation "LLC" or the abbreviation "L.L.C."  |
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| ce address on our reco                              | rds, enter the name of the new reg   |
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| Enter Florida .                                     | street address   |
|   | , Florida<br>Zıp Code  |
| -   | Хıр Code   |
| <u>nt:</u>  |  |
| igree to act in this cap                            | acity. I further agree to comply w   |
|   | ability Company here: ability Company," the designment of the desi |

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, <u>enter the title, name, and address of each person\_being added</u> or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>                 | <u>Address</u>                              | Type of Action |
|--------------|-----------------------------|---|----------------|
| MGR          | Telos Asset Management, LLC | 715 Wesley Avenue, Tarpon Springs, FL 34689 | DAdd           |
|              |                             |   | Remove         |
|              |                             |   | □Change        |
| MGR          | Lucas Louis Pappas          | 715 Wesley Avenue, Tarpon Springs, FL 34689 | =Add           |
|              |                             |   | □Remove        |
|              |                             |   | □Change        |
|              |                             |   | □Add           |
|              |                             |   | □Remove        |
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| E. Effective date, if other than (If an effective date is listed, the da Note: If the date inscreed in the document's effective date on the control of the c | us block does not:   | meet the applicabl | date of filing or more that<br>e statutory filing requ | (optional)<br>n 90 days after filing.) Pursu<br>irements, this date will n | ant to 605 0207 (3)(to the listed as the |
| If the record specifies a delayed ef record is filed.  | fective date, but no | an effective time  | e, at 12:01 a.πι. on the                               | earlier of: (b) The 90th   | day after the                            |
| Dated April 19   |                      | 2023               |  |  |  |
|  |                      |                    |  |  |  |
|  |                      | manhar or authori  | ed representative of a m                               | ambar  |  |

Typed or printed name of signee

TO: Florida Division of Corporations

Monday April 24, 2023

RE: Amendment for Pappas Real Estate, LLC

I, Lucas Louis Pappas, authorize Michael Louis Pappas 2/27/87 (an employee and registered real estate agent for Pappas Real Estate, LLC) to conduct business on my behalf. Michael Pappas is authorized to submit, in person, the attached/completed Amendment for Pappas Real Estate, LLC for immediate processing.

KATERINA CONSTAS
Notary Publik - State of Florida
Commission # GG 951154
My Comm. Expires Mar 11, 2024
Bonded through National Notary Assn.

Thank you,

2023 APS 25 ATT 10: 4,

Lucas L Pappas