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(shown below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ENGLANDER FISHER Account Number : I20210000198 Phone : (727)898-7210 Fax Number : (727)898-7210

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: michael@jade-re.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN-JADE REAL ESTATE LLC

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Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Enclosed is a check for the following amount:

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Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

☐ \$60.00 Filing Fee.

Certified Copy

Certificate of Status &

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JADE REAL ESTATE LLC					
(Name of the Lim	ited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.) Company)			
The Articles of Organization for this Limited I Florida document number L23000155271	Liability Company were fil	led on March 28, 2023	 	and assigned	d
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liability con	npany here:			
The new name must be distinguishable and contain the	words "Limited Liability Comp	any," the designation "LLC" or	the abbrev	iation "L.L.C."	
Enter new principal offices address, if appli	cable:				
(Principal office address MUST BE A STRE	ET ADDRESS)				
Enter new mailing address, if applicable:					
Mailing address MAY BE A POST OFFICE	<u> </u>				
B. If amending the registered agent and/or agent and/or	registered office address	on our records, enter the	name of	the new reg	<u>ziste</u> ı
				·	
Name of New Registered Agent:	Englander & Fischer, P.,	A	•	<u> </u>	,
New Registered Office Address:	721 First Ave N			PH C	
		Enter Florida street address			
	St. Petersburg	, Florid		9	_
	City	- ·· ·	2	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

From: Diedre Tarner

Fax: 17278987210

To

Fax: (850) 617-6383

Page: 5 of 6

04/21/2023 11:40 AM

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

Title	<u>Name</u>	Address	Type of Action
AMBR	OVERLOOK POINT CAPITAL LI	382 NE 191ST ST #338842	🗀 Add
		MIAMI, FL 33179	■ Remove
			□Change
AMBR	JRE-WU LLC	382 NE 191ST ST #338842	≅ Add
		MIAMI, FL 33179	□ Remove
			□Change
			🗀 Add
			Remove
			Change
			Remove
			Change
		- the state of the	□Add
			Remove
			☐ Change
			□Add
			Remove
			□Change

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		(The A	tela	> <			
April 18 Oated			2023	·				
record specifies a d d is filed.	elayed effective	date, but not a	an effective	time, at 12	:01 a.m. on	the earlier of	(b) The 90	th day after the
ffective date, if of an effective date is lis <u>lote:</u> If the date ins ocument's effective	ted, the date must l crted in this bloc	be specific and ck does not m	: cannot be pri cet the app	ior to date of licable statu	tiling or more tory filling re	than 90 days a	ptional) fler filing.) Pur this date will	rsuant to 605.0207 not be listed as
			MARCH	28, 2023				
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