## L23000183679

(Requestor's	Name)
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## **COVER LETTER**

Division of Co	rporations	,	
Buy or Sel	l Real Estate LLC		
	Buy or Sell Real Estate LLC    Name of Limited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Lisett Melchor		
		Name of Person	
	Owner		
		Firm/Company	<del></del>
	3830 Kelly Street		
		Address	
	Fort Myers, FL 33901		
			ification)
For further information			·
Lisett Melchor		239 2889759	
Name		Area Code Daytir	ne Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

TO: Registration Section

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Buy or Sell Real (Name of the Limited Liability Compa (A Florida Limited I	Estate L 200 PM 4:11
(A Florida Limited I	Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on $\frac{4-13-2023}{}$ and assigned
Florida document number <u>L23000183679</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Lisett Melchor	LLC
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3830 Kelly Street
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers FL 33901
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	3830 Kelly Street Fort Myers FL 33901
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code

New Registered Agent's Signature, if changing Registered Agent: N/A

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
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AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
		<u> </u>	□Remove
			Change
			□Add
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.		_
		_
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	R 20	- Mariana
	PM 4:	m <b>0</b> –
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Effective date, if other than the date of filing:	Pursuant to 6 vill not be l	605.0207 (1 listed as th
ne record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The ord is filed.	90th day a	fter the
Dated 4-17- 2023.  List Miller		
Signature of a member or authorized representative of a member		
Lisett Melchor Typed or printed name of signee		

Filing Fee: \$25.00