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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: <u>C'AM</u> C	Name of Lim	L.L.C.	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
			2
	CANDACE A. FI	TTZGORDON	023
		Name of Person	
	ELLTE REALTY PA	PRTNERS, INC	2023 JUH 27 AM 8: 50
		i inib company	. 89
	12781 MIRA	MAR PEWY SLETTE 3	ol
	MIRAMAR FL	33027 City/State and Zip Code	
	, -		
	E-maii address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
CANDACE A.F.	TIGORDON	at ()	
Name	of Person	at () Area Code Daytim	c Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration Se	
Division of	Corporations	Division of Cor The Centre of T	•
P.O. Box 63 Tallahassee,			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CANDACE A. FIT	ZGORDON, L.L.C.	20
(Name of the Limite	d Liability Company as it now appears on ou A Florida Limited Liability Company)	ır records.)
(A Fiolida Ellinica Elability Company)	
he Articles of Organization for this Limited Lia	shility Company were filed on 19 A	and assigned
ne Articles of Organization for this Littlited Lis	nomity Company were med on	W. and assigned
lorida document number <u>L2300019343</u>	<u> </u>	
n		
his amendment is submitted to amend the follo	wing:	- 5
If amending name, enter the new name of	the limited liability company here:	0
_		
CANDACE A. FITZGORDON PL	<u> </u>	in or con at the sister of LCB
he new name must be distinguishable and contain the we	ords "Limited Liability Company," the designat	ion "LLC" or the appreviation L.L.C.
Enter new principal offices address, if applica	ıble:	
• •		
<u> Principal office address MUST BE A STREE </u>	ADDRESS)	
and the second s		
Inter new mailing address, if applicable:		
<u>Mailing address MAY BE A POST OFFICE I</u>	<u></u>	
3. If amending the registered agent and/or re	paistered office address on our record	s, enter the name of the new register
gent and/or the new registered agent and/or to		, <u></u>
gent and/or the new registered office waster	 -	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eei aaaress
	Enter Florida stro	eei aduress
	Enter Florida str	, Florida 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

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
			□Add
			□Remove
			DAdd C
			☐Remove=
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			Change
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record s I is filed	specifies a d l.	elayed eff	ective date	, but not	an effec	tive time	, at 12:01	a.m. on	the earlie	er of: (b)	The 90th	n day afte	er the
ated	June	27	<u> </u>										
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