

L23000 222592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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R. HUNT

05/07/24

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** MASIS ROYALTY REAL ESTATE LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LILJANA M MASIS

Name of Person

MASIS ROYALTY REAL ESTATE LLC

Firm/Company

452 OSCELA ST SUITE 108

Address

ALTAMONTE SPRINGS, 32701

City/State and Zip Code

ROYALTYMASIS@GMAIL.COM

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

LILJANA M MASIS

760 76062065

Name of Person

at ( )  
Area Code

Daytime 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)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**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**

MASIS ROYALTY REAL ESTATE LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MAY 05, 2023 and assigned  
Florida document number L23000222592.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

LILJANA M

LILJANA M MASIS

New Registered Office Address:

452 OSCEOLA ST SUITE 108

*Enter Florida street address*

ALTAMONTE SPRINGS

Florida 32701

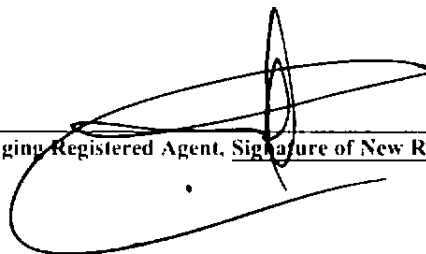
*City*

*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



**MGR = Manager**  
**AMBR = Authorized Member**

[illegible]

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04/23/2024

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 04/23 2024

LILJANA M MASIS

Typed or printed name of signee