L23000294405

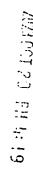
(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Otty/State/Zipir Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Certified copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800417635848

19/28/23--01931--013 **30.00







COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: H5H Real Estate Services, 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:					
Cillian Proctor Name of Person					
Firm/Company					
2791 Wright ave SE					
Palm Bay, FL 32909 City/State and Zip Code [I] Fraschetti @ gmail. Com E-mail address: (to be used for future annual report-abtification)					
For further information concerning this matter, please call:					
Name of Person at (301) 266-6907 Area Code Daytime Telephone Number					
Enclosed is a check for the following amount:					
S25.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certificate of Status Certificate of Status S60.00 Filing Fee, Certified Copy (additional copy is enclosed) 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

- $H3H$	Keal Estate:	Services LLC	
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our r ated Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Com Florida document number <u>L23000294</u>		2/23 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	r "LLC"		
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:	NIF		
(Principal office address MUST BE A STREET ADDRES	<u> </u>		
		70.7	
Enter new mailing address, if applicable:	NA	·-i	
(Mailing address MAY BE A POST OFFICE BOX)		——————————————————————————————————————	
The state of the s		- 173 	
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>e</u>	nter the name of the new registered	
Name of New Registered Agent:	A		
New Registered Office Address:			
 	Enter Florida street a	ddress	
	, Florida		
	Сіў	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.

It 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	Name	Address	Type of Action
			□ Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□ Add
			□Remove
			Change
			□Add
		□ Remove	
			Change
			□Add
			□Remove
			□Change