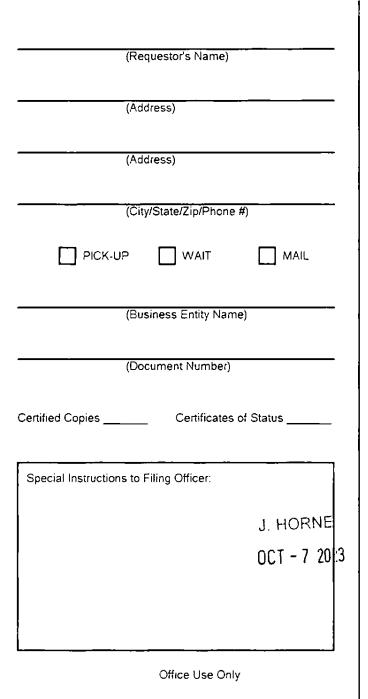
## L23000310484





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09/22/23--01019--004 ++25.00



## **COVER LETTER**

Div	ision of Corpo	prations				
SUBJECT:		OPERTIES LLC				
o bole 1.		Name of Limited Liability Company				
The enclosed	l Articles of Ai	nendment and fee(s) are subn	nitted for filing.			
Please return	all correspond	lence concerning this matter to	o the following:			
		Stephanic Goebel				
			Name of Person	<del> </del>		
		ZenBusiness Inc.				
	Firm/Company					
	5511 Parkcrest Drive, Ste. 103					
			Address			
		Austin, TX 78731				
			City/State and Zip Code	<del></del>		
		fulfillment@zenbusiness.cor	n			
		E-mail address: (to	be used for future annual report not	fication)		
For further in	formation con	cerning this matter, please cal	II:			
Stephanie Goebel c/o ZenBusiness Inc.			844 493-6249 at ()			
	Name of P	'erson	Area Code Daytim	e Telephone Number		
Enclosed is a	check for the	following amount:				
<b>■ \$</b> 25.00 F	iling 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 "

TO:

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number L23000310484	:	22
This amendment is submitted to amend the following:		99
A. If amending name, enter the new name of the lin	mited liability company here:	
Fort Myers Realty Group LLC		3 <del>1</del>
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	ORESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		e name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
<del></del>	, Florida	Zin Coda

## 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>	<u>Name</u>	Address	Type of Action
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			Remove
			Change
<del></del>		<del> </del>	Add
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		<del></del>	
			□ Remove
			□ Change

	ding any other inforn	izuon, enter c	nange(s) nere	· (/mac// addi	nonai sneeis, ij n	ecessary.)	
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If an effect <u>Note:</u> If	e date, if other than the tive date is listed, the date in this it's effective date on the	ust be specific and block does not n	d cannot be prior neet the applica	to date of filing or	more than 90 days af	fter filing.) Pursuant to	
	rd specifies a delay Oth day after the re			t an effective	time, at 12:03	La.m. on the ea	arlier of
A Dated	ugust 20		2023	<u> </u>			
	/s/ Kara Ackley						
	/s/ Kara Ackley	Signature of a	member or author	rized representativ	ve of a member		_

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Filing Fee: \$25.00