L23000320974

(Requestor's Name) (Address) (Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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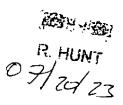
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COVER LETTER

TO: Registration Se Division of Cor		•	•	•	
Approved . SUBJECT:	Patriot Realty				
30 b 0EC.1.	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Vance Scott				
		Name of Person			
	Approved Patriot Realty I.	4.C		. 3 	
		Firm/Company	· .		
	296 River Road		J.	23	:
		Address	<u> </u>	7	-
	Eastman, GA 31023		STATE OF THE STATE	20 PH 7:42	٦.
		City/State and Zip Code		Ю	
	vance@patriotrealty.com				
For further information of	E-mail address: (oncerning this matter, please c	to be used for future annual report no all:	tification)		
Vance Scott		386 661-8000			
Name o	f Person		me Telephone Number	_	
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate of Certified Cop (additional copy	Status & y	
Mailing Address		Street Address:			
Registration S Division of C		Registration So Division of Co			
P.O. Box 632		The Centre of			
Tallahassee, I	FL 32314	2415 N. Monro	oe Street. Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Approved Patriot Realty				
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears (Liability Company)	on our records.)	
The Articles of Organization for this Limited I Florida document number L23000320974	.iability Company	were filed on July	06, 2023	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liah	oility company here	<u>:</u>	
NA				
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desi	gnation "LLC" or the abb	reviation "L.L.C."
Inter new principal offices address, if appli	cable:	NA		
Principal office address MUST BE A STRE.		NA		F3
		NA		ن ،
Enter new mailing address, if applicable:		NA	3: 1 	20
Mailing address MAY BE A POST OFFICE	(ROX)	NA	Cy Cy	
	<u> </u>	NA	ਜ਼ਲ਼ੀ ਜ਼ਲ਼ੀ	-1 500
			1 1	₹>
3. If amending the registered agent and/or gent and/or the new registered office address.		address on our rec	ords, <u>enter the name</u>	of the new regist
Name of New Registered Agent:	NA			
New Registered Office Address:	NA			
		Enter Floride	i street address	
	NA		, Florida ^{NA}	
		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

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	<u>Address</u>	Type of Action
MGR	Jeffrey R Ward	160 Cypress Point Pkwy Suite D108	≡ Add
		Palm Coast, FL 32164	□Remove
			□Change
			□ Add
			□Remove
			□Change
			Remove PR STA Change
			☐ Change ☐ Add
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te, if other than the date of filing: late is listed, the date must be specific and cannot be prior to date of filing or more that date inserted in this block does not meet the applicable statutory filing requificative date on the Department of State's records.	(optional) 190 days after filing irements, this date	.) Pursuant to 605

Filing Fee: \$25.00