

L23000342493

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

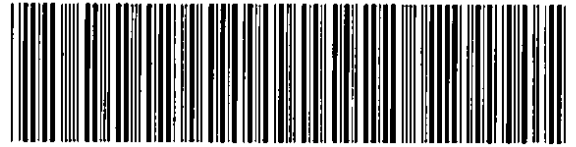
(Business Entity Name)

(Document Number)

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2023 SEP -1 AM 10:55

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Bristo Street Real Estate Holdings 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:

William R Sawyer

Name of Person

Firm/Company

358 Bear Trap Rd

Address

Milton VT 05468

City/State and Zip Code

bill@wrs-vt.com

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

For further information concerning this matter, please call:

William Sawyer

Name of Person

at (**802**)

Area Code

324-0486

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Bristo Street Real Estate Holdings LLC

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

2023 SEP -1 AM 10:55

The Articles of Organization for this Limited Liability Company were filed on July 19, 2023 and assigned Florida document number L23000342493.

This amendment is submitted to amend the following:

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

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)

358 Bear Trap Rd

Milton VT 05468

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

358 Bear Trap Rd

Milton VT 05468

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:

William R Sawyer

New Registered Office Address:

5242-5244 Bristo St.

Enter Florida street address

Lehigh Acres

City

Florida

33971

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.

DocuSigned by:

William R Sawyer

86964CD563FB481

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>	<u>Address</u>	<u>Type of Action</u>
MGR	1031 Reverse Exchange Company LLC	15671 San Carlos Blvd 101	<input type="checkbox"/> Add
		Ft Myers FL 33908	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	William R Sawyer	358 Bear Trap Rd	<input checked="" type="checkbox"/> Add
		Milton VT 05468	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: August 24, 2023 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 24, 2023

-DocuSigned by:

Theresa Knower

- DF : 17D05C0974DD

Signature of a member or authorized representative of a member

Theresa Knowler, Manager of 1031 Reverse Exchange Company LLC

Typed or printed name of signee

Filing Fee: \$25.00