13600374077

(Requestor's Name)		
(Add	iress)	
(Address)		
(City)	/State/Zip/Phon	e #1
(City	iotate/21p/r non	e #)
		MAIL
(Bus	iness Entity Nar	me)
(203		
(Doc	ument Number))
Certified Copies	Certificates	s of Status
Special Instructions to F		
	ining Officer.	.\
•		
l		

Office Use Only



10/23/23-01022-009 **\$25.00

2023 OCT - 5 F* 3: 29



COVER LETTER

TO: Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: くく Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:



The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF					
ARTICLES OF ORGANIZATION					
OF					
	ay as it now appears on our records.)				
The Articles of Organization for this Limited Liability Company Florida document number $L23000374077$	were filed on $8 - 89 - 23$	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi BJM Really Co The new name must be distinguishable and contain the words ^{ee} Limited Liabili		m)			
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)	/				
		21			
	CN	23 (
Enter new mailing address, if applicable:	Sa				
(Mailing address MAY BE A POST OFFICE BOX)					
		()			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the nan</u>	ne of the new registered			
		~			
Name of New Registered Agent:	<u>L</u>				
New Registered Office Address:	Scr				
	Enter Florida street address				
/	, Florida				
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Code			
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.

c. - c

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

Title	Name	Address	Type of Action
			🗆 Remove
			Change
		······	🗆 Add
			🖸 Remove
			Change
	'n	N Z	202Remove
	$\langle a \rangle$		🛛 💭 🗍
			Add Add 9 Remove
		<u> </u>	🖸 Remove
			Change
			🗆 Add
			🗆 Remove
			Change
			🗆 Add
			🗆 Remove
			DChange

. . .

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

/	
	······································
A'/	
	~
	22
) נ
	2023 OCT
/	; .
	
/	
	۔ ب
	9

E. Effective date, if other than the date of filing: ____ (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 10-13-23 Signature of a member or authorized representative of a member

Typed or printed name of signee