## L23600463147

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Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of Co	rporations		
	te Living LLC		
SUBJECT:	Name of Lim	ited Liability Company	
		( C . C):	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Michelle Bell		
	<del></del>	Name of Person	<u>.</u>
	Florida Elite Living LLC		
		Firm/Company	
	1746 E. Silver Star Rd #28	30	
		Address	
	Ocoee FL 34761		
		City/State and Zip Code	<del></del>
	michelle@floridaeliteliving E-mail address: (	com to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
Michelle R Bell		407 234-2662	
Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing 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 Addre		Street Address: Registration So	ection
Division of C	Corporations	Division of Co	rporations
P.O. Box 633		The Centre of	
Tallahassee,	FL 32314	2415 N. Monro	oc Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Florida Elite Living, LLC			2024 HOY 25 DV
(Name of the Limi	ted Liability Compa (A Florida Limited)	inv as it now appears on our Liability Company)	Z024 HOY 26-PH 12: 45
ne Articles of Organization for this Limited Lorida document number 123000463147		were filed on 10/09/2023	TATE AND DESTURE
nis amendment is submitted to amend the foll	owing:		
If amending name, enter the new name of	f the limited liab	ility company here:	
ELL Realty & Associates, LLC			
e new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applic	cable:	1918 St James Ct	
Principal office address MUST BE A STREET ADDRESS)		Ococe, FL 34761	
Auiling address MAY BE A POST OFFICE	w mailing address, if applicable:  address MAY BE A POST OFFICE BOX)  ending the registered agent and/or registered office address		enter the name of the new registe
ent and/or the new registered office addre	*,*	•	
Name of New Registered Agent:	Michelle Bell		
New Registered Office Address:	1746 E. Silver	Star Rd #280	
		Enter Florida street	address
	Ocoee		_, Florida
		Сиу	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>	<u>Name</u>	Address	Type of Action
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Effective date, if other than the difference date is listed, the date must be Note: If the date inserted in this bloc document's effective date on the Department.	k does not meet t	he applicable	ate of filing or more statutory filing r	(option than 90 days after equirements, this	onal) filing.) Pursuant to 6 date will not be l	505,0207 ( isted as t
e record specifies a delayed effective or dis filed.	late, but not an ef	ffective time,	at 12:01 a.m. on	the earlier of: (b)	The 90th day a	fter the
	•	124				
November 15 Dated	. 20					
Dated	·	,				
Dated	·	,	d representative of	a member	<del></del>	