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COVER LETTER

TO:

	gistration Se Ision of Cor			
eubirer.	MARTINE	Z GROUP PROPERTIES LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		BLANCA MILENA QUIN	NCHIA MARTINEZ	
			Name of Person	
			Firm/Company	
3068 PATTERSON GROVES DR				
			Address	
		HAINES CITY, FL 33847		
			City/State and Zip Code	
		PROPERTIESMARTINEZ	LLC@GMAIL.COM to be used for future annual report no	TA myline
For further i	nformation c	oncerning this matter, please co	•	irreactory
BLANCA M	MILENA QU	INCHIA MARTINEZ	863 247 1528 at ()	
<u> </u>	Name o	f Person	Area Code Daytii	me Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed)
Mailing Address: Registration Section		Street Address:	ection	
Division of Corporations		- -	Registration Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Mour	oe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MARTINEZ GROUP PROPERTIES LLC

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

The Articles of Organization for this Limited Liability (Florida document number L24000031913	Company were filed on 01/16/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	-	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
(Principal office address MUST BE A STREET ADD	RESS)	
		75
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		🛎
agent and/or the new registered office address here: Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
Florida		Florida
New Registered Agent's Signature, if changing Register		rip Couc
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered of being filed to merely reflect a change in the register company has been notified in writing of this change	complete performance of my duties, agent as provided for in Chapter 60, ed office address, I hereby confirm	and I am familiar with and 5, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	DOLLY MARTINEZ ROJAS	7862 W IRLO BRONSON MEMORIAL HWY	■ Add
		SUITE 20	□Remove
		KISSIMMEE, FL 34747	☐ Change
MBR	MILTHON E.MARTINEZ ROJAS	7862 W IRLO BRONSON MEMORIAL HWY	\@Add
		SUITE 20	□Remove
		KISSIMMEE, FL 34747	□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			🗆 Change
			□ Add
			□Remove
			🗆 Change
			🗆 Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 04/04/2024 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. APRIL 4 2024 Dated ___ BLANCA MILENA QUINCHIA MARTINEZ Typed or printed name of signee

Filing Fee: \$25.00