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## **COVER LETTER**

то:	Registration Se Division of Cor					
		REALTY PARTNERSHIP LL	С			
SUBJE	ECT:		ited Liability Company	<del></del>		
The en	closed Articles of .	Amendment and fee(s) are sub	omitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		JESSE J. LO RE				
			Name of Person			
		THINK WISDOM PART	NERSHIP, INC.			
		Firm/Company 23087 BELCANTO ROAD				
		Address				
		BOCA RATON, FL 33433				
		City/State and Zip Code				
		JESSE.LORE@THINKWISDOM.COM  E-mail address: (to be used for future annual report notification)				
For fur	ther information co	oncerning this matter, please c	-	Rations		
JESSE	E J. LO RE		561 699-9160 at ( )			
	Name of	r Person		Telephone Number		
Enclos	ed is a check for th	ne following amount:				
□ \$2	5.00 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 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**

assigned
ıssigned
"L.L.C."
<del></del>
!
<u> </u>
-
- 

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>	<u>Address</u>	Type of Action
MGR	MARITZA F LO RE, LLC	3050 NE 5TH AVENUE	□ Add
		BOCA RATON, FL 33431	■Remove
			□Change
MGR	SILVA DE OLIVEIRA, RENATO	2611 NE 18TH TERRACE APT A	□Add
		LIGHTHOUSE POINT, FL 33064	<b>≡</b> Remove
			Change
MGR	REDLAND MARINE SERVICE LLC	REDLAND MARINE SERVICE LLC	■Add
		18921 STERLING DRIVE	□Remove
		CUTLER BAY, FL 33157	□ Change
			🗆 Add
			Remove
		<del></del>	□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change

2. REDLAND MARINE SERVICES LLC - 18921 STERLING ROAD, CUTLER BAY, FL 33157  ADDITIONAL NOTES: THE NAME GLOBAL REALTY PARTNERSHIP LLC WAS ENTERED WITH A TYF  OF TWO COMMAS AND THUS I HAVE CHANGED THE NAME TO REMOVE ALL COMMAS AND LIST  AS "GLOBAL REALTY PARTNERSHIP LLC"  THANK YOU FOR YOUR PROMPT ATTENTION AS ALWAYS!  JESSE J. LO RE (561) 699-9160  Effective date is listed, the date must be specific and cannot be prior to date of filling or more than 90 days after filling.) Pursuant to 605.0207 (3)  Moste: If the date inserted in his block does not meet the applicable statutory filling requirements, this date will not be listed as the document's effective date on the Department of State's records.  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 ord is filled.  MARCH 10, 2024  MARCH 10, 2024  Signature of a member or authorized representative of a member		MGRS SHOULD BE 1. THINK WISDOM PARTNERSHIP, INC 23087 BELCANTO ROAD, FL 33433 AND
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Dated		
X & C	Data	MARCH 10, 2024
Signature of a member or authorized representative of a member	Date	

Filing Fee: \$25.00

Typed or printed name of signee