To: 18506176383

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5/14/24, 10:02 AM

Division of Corporations



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120890008081 Phone : (307)200-2803 Fax Number : (813)436-5206

> **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:_____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CK REALTY & INVESTMENTS LLC

Cenificate of Status	0
Cenified Copy	0
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DEFANCE CORPORATIONS
TALL SHANSSES, FLORIDA

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2024 HAY IL AM 10: 55

T. LEMIEUX MAY 15 2024 Fax: 8134365206

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CK Realty & Investments LLC	***	3 0 €
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L24000109791	were filed on <u>03/04/24</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ollity company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	525 Dotterel Rd Apt 35D	
(Principal office address MUST BE A STREET ADDRESS	Delray Beach, FL 33444	
Enter new mailing address, if applicable:	525 Dotterel Rd Apt 35D	
(Mailing address MAY BE A POST OFFICE BOX)	Delray Beach, FL 33444	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the Enter Florida street address Floric	HAY ILL AH ID: 55
	, Floric , Floric	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.

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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
			□ Add
		<u> </u>	□Remove
			Change
			□Add
			□Remove
			□Change
		<u> </u>	□Add
			□Remove
			FAdd
			□Remove
			□Change
			□Add
			□Remove
			☐Change
			□Add
			□Remove

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E. Effective date, if other than the	ne date of filing:		(optional)	
(If an effective date is listed, the date m	ust be specific and cannot be prior to block does not meet the applical	o date of filing or more than 90 ble statutory filing require:	days after filing.) Pursuant to 605.020 nents, this date will not be listed as	7 (3)(b) i the
If the record specifies a delayed effect record is filed.	ive date, but not an effective tim	ne, at 12:01 a.m. on the car	lier of: (b) The 90th day after the	
Dated May 14	Signature of a member or author	•		