## L24000 176 296

(Requestor's Name)
(Address)
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,
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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	egistration Se ivision of Cor		•	
CUDIFCT		l Estate LLC	•	
SUBJECT	:	Name of Lin	nited Liability Company	
The enclose	ed Anicles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		Blaine Ruttan		
		-	Name of Person	
		Ruttan Real Estate LLC		
			Firm/Company	207-15
		8068 34th ave N		
			Address	
		St. Petersburg FL 33710		ි. - 17-
			City/State and Zip Code	
		blaineruttan@gmail.com		
			to be used for future annual report no	tification)
For further	information c	oncerning this matter, please c	rall:	
Blaine Rut	tan		727 5437215 at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is	a check for th	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)
	ailing Addres	<del></del>	Street Address: Registration S	ection
	_	Section Corporations	Division of Co	
Ρ.	O. Box 632	.7	The Centre of	
1	allahassee, l	FL 32314	Z410 IN. MORE	oe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION OF

Ruttan Real Estate LLC	<del></del>	<del></del>
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) Jiability Company)	
The Articles of Organization for this Limited Liability Company	were filed on April 15 2024	and assigned
Florida document number 1.24000176296		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil:	ity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		しか
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u>.</u> <u></u>
		5.5
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 th</u>	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da
	City	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.

••	_	•	 _	•	 -		 -	_	_	_	÷	_		
			 		 				_	_				

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Joe Springer	3962 14th lane NE St. Petersburg FL 33703	<b>■</b> Add
			□Remove
			Change
			□Remove
			□ Change
			□Add
			202 ☐ □ Remove
		· · · · · · · · · · · · · · · · · · ·	Change
		· · · · · · · · · · · · · · · · · · ·	□Remove
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ote: If the date inserted in this	he date of filing:	date of filing or more than 90 da e statutory filing requiremen	(optional) ys after filing.) Pursuant to 605.020 nts, this date will not be listed as
ecord specifies a delayed effectis filed.	tive date, but not an effective time	, at 12:01 a.m. on the earlie	of: (b) The 90th day after the
April 26	2024		

Blaine Ruttan