L24000187930

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600432961716

LLC Amend

07/12/24--01046--007 **25.00



ARAMSEY

COVER LETTER

TO:	Registration Sect Division of Corpo		ć *	1	•
SUBJEC	CT: ALO	REALTY Name of Lim	GUSINE	5'5 LLC	
The encl	osed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspond	lence concerning this matter	to the following:		
		Diniz du	Name of Pers	uraldo	Date of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
		ALD ROAL	i mir Compa	113	7 C
		Jooss tyll	ER Loop Address	10104	
		win ter Gara	Je N. Fl City/State and Zip	34787	
		Lucinaldin 12 E-mail address: (1	a yahon. To be used for future	Com . br	tion)
For furth	er information con	cerning this matter, please ca	ıll;		
Din	Name of P	nei Geraldo erson	at (<u>407</u> Area Coo	$\frac{2}{16}$ Daytime Te	8 7 8 clephone Number
Enclosed	is a check for the	following amount:			
\$ \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Certified Contadditional contaddition	ору	Certificate of Status & Certified Copy
	Mailing Address: Registration Sec	ction		reet Address: egistration Section	on .

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

FILED

2024 JUL 12 PM 12 56

(Name of the Limited Liability Company as it now appears on our records.) A SEE (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on $\frac{09/30/3099}{10000000000000000000000000000000000$	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
he new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."	
Inter new principal offices address, if applicable:	_
Principal office address MUST BE A STREET ADDRESS)	_
	_
Inter new mailing address, if applicable:	_
Mailing address MAY BE A POST OFFICE BOX)	-
	-
s. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registe</u> gent and/or the new registered office address here:	<u>red</u>
Name of New Registered Agent:	_
New Registered Office Address:	
Enter Florida street address	-

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.

City

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
MGR	Din 12, Lucina i Geroldo	10055 tolle: Loof 12004 winter Gorden 34787	_ 🂢 Add
			_ 🗆 Change
			_ □Add
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(If an effective Note: If the	tive date, if other than the date of filing: (optional) (ive 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 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be it's effective date on the Department of State's records.	o 605.0207 (2 c listed as th
he record sp ord is filed.	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day l.	after the
Dated	06/27 2024	
	Signature of a member/or authorized representative of a member	_
	Oiniz, Lucinei Geraldo	

Filing Fee: \$25.00