124000279175

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S. PRATHER

COVER LETTER

TO:

Tallahassee, FL 32314

	istration Sect sion of Corp					
CUB IECT.	WATERLEA	AF REAL ESTATE, LLC				
SUBJECT	U.L. = 0	Name of Limi	ited Liability Company			
The enclosed	Articles of A	mendment and fee(s) are sub-	mitted for filing.			
Please return	all correspon	dence concerning this matter	to the following:			
		GREGORY DEMARAS				
			Name of Person			
		<u> </u>	Firm/Company			
		16061 WATERLEAF LAN				
			Address			
		FORT MYERS FL 33908				
		GREG@PFEIFERREALTY	City/State and Zip Code 'GROUP.COM			
		E-mail address: (i	to be used for future annual report no	otification)		
For further in	formation co	ncerning this matter, please ca	all:			
GREGORY	DEMARAS		917 837-7009			
	Name of I	Person	at () Area Code Dayti	ime Telephone Number		
Enclosed is a	check for the	following amount:				
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	ling Address: gistration Se		<u>Street Address:</u> Registration S	Section		
Div	ision of Co	rporations	Division of Co	orporations		
P.O. Box 6327			The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WATERLEAF REAL ESTATE, LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L24000279175}{L24000279175}$.	were filed on 06/19/24	and assigned n
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
GREGORY DEMARAS, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	16061 Waterleat	Lanc
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers FL 3390) <u>B</u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name	of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florida	

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

Zip Code

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
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			□Remove
			□ Change
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		Signature of	f a member or a	anorized repres	entative of a mu	mber	ALL MASSER F	24 JU

Filing Fee: \$25.00