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(((H24000365045 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 : (844)449-3624 Phone Fax Number : (512)597-0678

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

Email Address:_

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K. SALY NOV - 4 2024

2024-11-02 09:42:39 UTC+14 COVER LETTER

18506176383

From: ZenBusiness User

	tration Sc on of Cor			
enniner.	he Stamp	Collection LLC		
SUBJECT: _		Name of Lin	ited Liability Company	
The enclosed A	articles of .	Amendment and fee(s) are sub	omitted for filing.	
Please return a	II сотте <mark>ѕр</mark> о	ndence concerning this matter	to the following:	
		Jonathan Taboada		
			Name of Person	
		ZenBusiness INC		
			Firm/Company	
		336 E. College Ave Suite	301	
			Address	<u> </u>
		Tallahassee, FL 32301		
			City/State and Zip Code	
		fulfillment@zenbusiness.co		
		E-mail address: (to be used for future annual report notifi	ication)
For further infe	rmation co	oncerning this matter, please c	all:	
c/o ZenBusine	ss INC		844 493-6249 ut ()	
	Name of	Person		Telephone Number
Enclosed is a cl	leck for th	e following amount:		
■ \$ 25.00 Fili	ng 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)
	e Address		Street Address: Registration Sec	tion
Divis	ion of Co	orporations	Division of Corp	porations
-	Box 632		The Centre of Ta	
i alia	nassee, P	L 32314	Z410 IN. MONTOC	Street, Suite 810

Tallahassee, FL 32303

Page: 3 of 5

2024-11-02 09:42:39 UTC+14 18506176383 ARTICLES OF AVIENDMENT

TO ARTICLES OF ORGANIZATION OF

From: ZenBusiness User

FILED

2024 NOV -1 PM 5: 17

Profrealestate LLC

(Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

Florida document number L24000291330 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new muiling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	The Articles of Organization for this Limited Liability Compan	y were filed on 2024-06-27	and assigned
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new muiling uddress, if applicable:	Florida document number 1.24000291330		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	This amendment is submitted to amend the following:		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable:	A. If amending name, enter the new name of the limited lia	bility company here:	
(Principal office address MUST BE A STREET ADDRESS) Enter new muiling uddress, if upplicable:	The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new mailing address, if applicable:	Enter new principal offices address, if applicable:		
u v	(Principal office address MUST BE A STREET ADDRESS)		
"			
"			
(Muiling address MAY BE A POST OFFICE BOX)	Enter new mailing address, if applicable:		
	(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:	•••	address on our records, <u>enter tl</u>	ne name of the new registered
Name of New Registered Agent:	Name of New Registered Agent:		
New Registered Office Address:	New Registered Office Address:		
Enter Florida street address		Enter Florida street address	
, Florida			
City Zip Code		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.

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Page: 4 of 5 2024-11-02 09:42:39 UTC+14 18506176383 From: ZenBusiness User amenoing Authorized Person(s) authorized to manage, enter the fine, 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
ΛMBR	Emma Margaret Whiteside	425 West Colonial Drive	
		Orlando, FL 32804-6863	
		US	□ Change
			□Remove
			□ Change
			S D Remaye
			Z]Change
			□Add
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Note: If the c	te, if other than the da are is listed, the date must be date inserted in this block ffective date on the Depa	does not meet the	applicable stat				
e record speci rd is filed.	ties a delayed effective da	ite, but not an effe	ective time, at 1	2:01 a.m. on the	earlier of: (b)	The 90th day	after the
Dated		2024					
/s/	Bradley Raymond Hicks						
-	Sig	nature of a member	or authorized re	presentative of a n	nember		-

Filing Fee: \$25.00