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09/18/24--01017--019 **25.00



COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Oak and E	lm Realty LLC		·
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Adam Grover		
		Name of Person	
		Firm/Company	
	5453 W Waters Ave Suite	101 Address	
	Tanan 11 23/21	Address	
	Tampa, FL 33634	City/State and Zip Code	
	agrover@mediaimages.con E-mail address: (to be used for future annual report notif	fication)
For further information of	concerning this matter, please c	all:	
Adam Grover		at (<u>614</u>) <u>332-0162</u> Area Code Daytino	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Cl \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre		<u>Street Address:</u> Registration Sec	stion
Registration Division of C		Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N	
(Name of the Limited Liability Compa (A Florida Limited I	ny as i <u>t now appears on our records.)</u> Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000376151</u> .	were filed on August 27, 2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabi</u>	ility company here:
Oak and Elm Realty, LLC	
he new name must be distinguishable and contain the words "Limited Liabil	ity 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 mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
bruning duaress bist bi. A 1 OST OFFICE BOX	
3. If amending the registered agent and/or registered office a	iddress on our records, enter the name of the new register
	iddress on our records, <u>enter the name of the new register</u>
	iddress on our records, <u>enter the name of the new register</u>
	iddress on our records, enter the name of the new register
gent and/or the new registered office address here: Name of New Registered Agent:	iddress on our records, <u>enter the name of the new register</u>
gent and/or the new registered office address here:	eddress on our records, enter the name of the new register
Name of New Registered Agent:	Enter Florida street address
Name of New Registered Agent:	
	Enter Florida street address , Florida

If Changing Registered Agent, Signature of New Registered Agent

If ainending 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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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ective date, if other than the effective date is listed, the date muster. If the date inserted in this blument's effective date on the De	ock does not meet the app	plicable statutory fil	more than 90 days after fing requirements, this	nal) iling.) Pursuant to 605.020 date will not be listed as
cord specifies a delayed effective s filed.	e date, but not an effectiv	re time, at 12:01 a.m	on the earlier of: (b)	The 90th day after the
ed August 29	2024	·		
		7/		
	/ / /			
	Signature of a member of a			

Filing Fee: \$25.00