Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

## Amended Certificate of Authority

Pursuant to the provisions of KRS chapters 14A and 271B, 273, 274, 275, 362, or 386, the undersigned hereby applies for an amended certificate of authority on behalf of the entity named below, and for that purpose, submits the following statements:

- 1. The business entity is a limited liability company (KRS 275).
- 2. The name of the business entity is:

## **Desert North Realty LLC**

- 3. The entity is organized and existing in the state or country of Arizona
- 4. The entity received authority to transact business in Kentucky on 11/9/2020.
- 5. This application will be effective on Tuesday, June 4, 2024.
- 6. The entity has changed its

Form of organization to a **limited liability company** Domicile name to **Realty85 LLC** 

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of **President: Jacob Chapman** 

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FCA

11/9/2020 12:00:00 AM

1120086.06 Michael G. Adams

Secretary of State Received and Filed

Fee receipt: \$40