# L070000000855

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(Address)				
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(Business Entity Name)				
(Document Number)				
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T. HAMPTON SEP 28 2010

EXAMINER

### **COVER LETTER**

TO: Registration Division of C	i Section Corporations					
SUBJECT:	Ocean	Sky Realty, LLC				
		nited Liability Company				
The enclosed Articles	of Amendment and fee(s) are su	abmitted for filing.				
Please return all corre	spondence concerning this matte	er to the following:				
		Denni Jordan				
		Name of Person				
		Firm/Company	<del></del>			
1779 SW 3rd Avenue						
		Address				
		Miami, FL 33129 City/State and Zip Code				
	miamir	realestateusa@hotmail.com				
	E-mail address:	(to be used for future annual report notific	eation)			
For further information	on concerning this matter, please	call:				
Now	Denni Jordan	at ( 305 ) Area Code & Daytime	456-6456			
ivaii	e of reison	Area Code & Daytime	Telephone Number			
Enclosed is a check for	or the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

#### **MAILING ADDRESS:**

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

#### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO

ARTICLES OF		ON	<u></u>	S S S
	OF		) SEP	SION
Ocean Sky (Name of the Limited Liability Com (A Florida Limite	y Realty, LLC	s on our records.)	22	TARY O
The Articles of Organization for this Limited Liability Compa			andrass	STATE FORMATION
Florida document numberL0700000885				₹5
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited l	iability company her	<u>e</u> :		
Miami Real E	state USA, LLC			
Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRESS</u> Enter new mailing address, if applicable:	<u> </u>			
• • • • • • • • • • • • • • • • • • • •				<del> </del>
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered registered agent and/or the new registered office address by		our records, <u>enter th</u>	ne name o	of the new
Name of New Registered Agent:				
New Registered Office Address:	En	ter Florida street addr	·ess	
		, 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 608, 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 Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amfending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

	Name	Address	Type of Action
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	<del></del>		Add Remove
			Add Remove
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f amend	ling any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.)	
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d	September 19th	2010 11 // //	SEP 22 AN 10: 42

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Filing Fee: \$25.00