## L070000010lde

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C. LEWIS

MAR - 8 2013

EXAMINER

## COVER LETTER

TO: Registration Section Division of Corporations

## SOUTH FLORIDA GLOBAL REALTY LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John F. Lopez

Name of Person

South Florida Global Real Estate

Firm/Company

2100 Ponce de Leon Blvd #1070

Address

Coral Gables, Florida 33134

City/State and Zip Code

JLOPEZ@SOUTHFLORIDAGLOBAL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN F LOPEZ

305 392-0239

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status □\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 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 ORGANIZATION OF



2013 MAR - 7 AM 8: 46

SOUTH FLORIDA GLOBAL RE		
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on cla Limited Liability Company)	<u>ur records.</u> )
The Articles of Organization for this Limited Liability Florida document number <u>L0700001066</u>	Company were filed on 01/04/2	007 and assigned
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
SOUTH FLORIDA GLOBAL REAL ESTAT		
The new name must be distinguishable and end with the v"L.L.C."	words "Limited Liability Company," t	ne designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office a		ecords, <u>enter the name of the nev</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Fi	orida street address
_		, Florida
	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 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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Ma MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Remove
			— □
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			Remove
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	n, enter change(s) here: (Attach additional sheets, if necessary), ARY  PROPERTY OF OR  ARY  ARY  ARY  ARY  ARY  ARY  ARY  A
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	ye of a member or authorized representative of a member
Cilono	

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Filing Fee: \$25.00