LO7000080335

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COVER LETTER

TO:

Registration Section

Division	of Corporations		
	TIER I REALTY LLC		
SUBJECT:	Name of L	imited Liability Company	······································
The enclosed Artic	cles of Amendment and fee(s) are su	ubmitted for filing.	
Please return all co	orrespondence concerning this matte	er to the following:	
	LOURDES A. VAZQUI	EZ	,
		Name of Person	
	EL TIER 1 REALTY LI	LC .	
		Firm/Company	
	600 NORTHERN WAY	#1503	
		Address	
	WINTER SPRINGS, FL	. 32708	
		City/State and Zip Code	
	eltier1realty@gmail.com		
	E-mail address	: (to be used for future annual report not	tification)
For further informa	ation concerning this matter, please	call:	
LOURDES A VA	ZQUEZ	407 529-7564	
1	Name of Person	at () Area Code Daytin	ne Telephone Number
			,
Enclosed is a check	k for the following amount:		
■ \$25.00 Filing I	Fee \$\Bigcup \$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)
F I F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	STREET/COUR Registration Section Division of Corpor Clifton Building 2661 Executive Corpor Tallahassee, FL 32	on orations enter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ELTIER	I REALTY LLC	•
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L07000080335	pility Company were filed on 8/18/2017	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	r registered office address on our records, ent	SEP TARE I
Name of New Registered Agent:		SSE O
New Registered Office Address:		OF S
	Enter Florida street address	IAIE DRID,
	, Florida	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.

If Changing Registered Agent, Signature of New Registered Agent

If amending 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>	<u>Address</u>	Type of Action
MGRM	LOURDES A. VAZQUEZ		
		600 NORTHERN WAY #1503	☐ Remove
		WINTER SPRINGS, FL 32708	■ Change
MGR	JULIO A. RAMOS		
		600 NORTHERN WAY #1503	□ Remove
		WINTER SPRINGS, FL 32708	
			Remove
			☐ Change
			□ Add
			□ Remove
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