L080001939a

questor's Name)	
dress)	
dress)	
:y/State/Zip/Phone	e #)
MAIT	MAIL
siness Entity Nan	me)
ocument Number)	
_ Certificates	s of Status
Filing Officer:	
	!
	dress) dress) y/State/Zip/Phone WAIT siness Entity Nar cument Number) Certificates

Office Use Only



000276834650

09/08/15--01021--020 **25.00

FILED ST

SEP 0 9 2015

COVER LETTER

TO: 1	Registration Sec Division of Corp	tion orations			
		ESTATE LLC			
SUBJEC	1:	Name of Limi	ted Liability Company	<u></u>	
The enclo	ised Articles of A	Amendment and fee(s) are sub-	nitted for filing		
Please ret	turn all correspon	idence concerning this matter	to the following		
		GIORGIO PICINELLI			
		<u> </u>	Name of Person		
		SOBE PROPERTIES			
		,	Firm/Company		
	1680 MICHIGAN AVE STE 910				
	Address MIAMI BEACH, FL 33139				
				ંગ છા	
		****	City/State and Zip Code		蜀五
		GPICINELLI & GMAIL CO		· · · · · · · · · · · · · · · · · · ·	o I
		E-mail address (to be used for future annual report notifi	.cation)	737.3
For furth	er information co	ncerning this matter, please co	o)l		
GIORGI	O PICINELLI		305 672 4971		
	Name of	Person	Area Code Daytime	Telephone Number	- 200
Enclosed	is a check for the	e following amount			
≘ \$2 5.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fe Certificate of S Certified Copy (additional copy is	tatus &

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

SAFE REAL ESTATE LLC			
(Name of the Lim	ited Liability Company as it now ap (A Figrada Limited Liability Compai	pears on our records.) ny)	
The Articles of Organization for this Limited I	nability Company were filed on	02/22/20X)8 and assign	acd
Florida document number L08000019392	on to the state of		
This amendment is submitted to amend the fol	lowing		
A. If amending name, enter the new name	of the limited liability compan	<u>y here</u> :	
The new name must be distinguishable and contain the	words "Limited Liability Company," t	the designation "LLC" or the abbreviation "L L C	1 140
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)	**************************************	
			~
Enter new mailing address, if applicable:			المعبد المام
(Mailing address MAY BE A POST OFFICE		1	
B. If amending the registered agent and registered agent and/or the new registered of		on our records, enter the name of	
	<u></u>	19 <u>0</u>	
Name of New Registered Agent:	GIORGIO PICINELLI		, ω
New Registered Office Address:	1680 MICHIGAN AVE STE	910	
	Enter	Florida street address	
	MIAMI BEACH	, Florida 33139	
	City	Zıp 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, Sienature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, cater the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Add
			□ Remove
			□ Change
de después de de	entanticular de la constitución de		□ Add
			☐ Remove
			☐ Change
			DAdd
			□ Remove
		18 Section of the Company of the Com	□ Change
	Printed Michigan Strangerschaft Strangerschaft Strangerschaft und der Strangerschaft und de		Add
			□ Remove
			Change Co
			Add 3
			□ Remove:
			☐ Change
atta (apage 1410), 2 (1), 2		dispersion dispersion in the second	□ Add
			□ Remove

	•
It amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
A NAME OF THE PROPERTY OF THE	
	-
The state of the s	••
	等 5
	, a.,
Effective data if other than the date of filing: (outlong)	
Effective date, if other than the date of filing:	ω 605 0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	be listed as the
document's effective date on the Department of State's records	
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the The 90th day after the record is filed.	earlier or:
The Soulday after the record is fixed.	
AUGUST 27 \ 2015	
Dated Address 27	
\mathcal{U}_{∞} 0 \mathcal{W}	
Signature of a member or authorized representative of a member	and the second s
ALESSANDRA BONZAGNI	
Typed or printed name of signee	-

Page 3 of 3

Filing Fee: S25.00