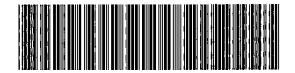
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**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co			•
SUBJECT:	Commercial Pro	perty Realty Group LLC	
SOBJECT:		ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	oondence concerning this matte	r to the following:	
		Elias Porras Name of Person	
		Name of Person	
	Commerc	Commercial Property Realty Group LLC	
		Firm/Company	
	2937 V	2937 W. Cypress Creek Rd #101	
		Address	
	Ft	. Lauderdale, FL 33309	
		City/State and Zip Code	·
		elias@cprgus.com	
			eation)
For further information	concerning this matter, please	call:	
	Elias Porras		975-7878 <u>P</u> g 2
Name	of Person	Area Code & Daytime	775-7878
			ASS T
Enclosed is a check for	the following amount:		سم الآرا
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Convil
	LING ADDRESS: tration Section	STREET/COURIE Registration Section	
Division of Corporations P.O. Box 6327		Division of Corpora Clifton Building	
	nassee, FL 32314	2661 Executive Cen	ter Circle .

Tallahassee, FL 32301

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

Comme	rcial Property Realty G	roup LLC		_	
(Name of the Limite	d Liability Company as it now ap A Florida Limited Liability Compa	ny)			
The Articles of Organization for this Limited I Florida document number		Jaunuary 13, 200	<u>19</u> and	l assigne	ed
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liability company	here:			
The new name must be distinguishable and end w"L.L.C."	ith the words "Limited Liability Co	mpany," the designation "	'LLC" or t	he abbro	eviation
Enter new principal offices address, if appli	cable:			Ph.3	
(Principal office address MUST BE A STRE	ET ADDRESS)		77. 132.		
			<b>₩</b>	2	
Enter new mailing address, if applicable:			TARY O	<u>ධ</u>	Strang ac Lacrang
(Mailing address MAY BE A POST OFFICE	· · · · · · · · · · · · · · · · · · ·	زئب اللب	Ēķ.	g-second	
Truming dudress MAI DE AI OST OFFICE	BUAJ		STATE	<u> </u>	
			<del>- Şiri</del>	<u></u>	
B. If amending the registered agent and registered agent and/or the new registered of		on our records, <u>enter</u>		e of th	<u>ie new</u>
Name of New Registered Agent:	Elias Porras				
New Registered Office Address:	2937 W. Cypress Creek	Rd			
	Enter Florida street address				
	Ft. Lauderdale,	, Florida	33	309	
	City		Zip C	ode.	
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 648, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Rogistered Agent Signature of New Registered Agent

If amending 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 MGRM = Managing Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
mgrm	Marisela Cotilla	2937 W. Cypress Creek Rd #101 Ft. Lauderdale, FL 33309	Add ✓ Remove
mgrm	Richard Schwartz	2937 W. Cypress Creek Rd #101 Ft Lauderdale, Fl. 33309	☐ Add ✓ Remove
mgrm_	Ronald A Schagrin	2937 W. Cypress Creek Rd #101 Ft_Lauderdale, FL 33309	Add Ø Remove
			Add Remove
	<del></del>		Add Remove
			Add S
D. It amen <u>R</u>	ichard Schwartz and Ronald A.	nange(s) here: (Attach additional sheets, if necessary Schagrin will remain as Members of the LL	OF STATE
_			<del></del>
Dated	August 4.	2011	
	Signature of a me	mber or authorized representative of a member	<del></del>
		Elias Porras  yped or printed name of signee	<del></del>
		, pea or princed nume of signee	

Page 2 of 2

Filing Fee: \$25.00