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COVER LETTER

	legistration Se Pivision of Cor			
CHDIECT		REALTY INVESTMENTS L	LC	
SUBJECT	·;	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ondence concerning this matter	to the following:	
		ISRAEL MOKADI		
			Name of Person	
		WINGATE REALTY INV		
			Firm/Company	
		524 DATURA STREET, S	Address	
		WEST PALM BEACH, FI	्राप्ताः । १८५ ५ ३३४०। - १८०३ - १८६५	CONTRACTOR CONTRACTOR
	•	*	City/State and Zip Gode	20.50.43
		ISI@MOKADI.COM	programme and the second	sud Standard British
			to be used for future annual report not	dification)
For further	r information c	oncerning this matter, please of	all:	
ISRAEL N	MOKADI		561 2604350 at ()	
	Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed i	s a check for the	he 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)
	Registe Divisio P.O. B	ING ADDRESS: ration Section of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	on orations

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

now appears on our records.) Company)			
iled on 03/01/2011 and assigned			
ompany here:			
apany," the designation "L.L.C." or the abbreviation "L.L.C."			
DATURA STREET			
TE 215			
ST PALM BEACH, FL 33401			
DATURA STREET CONTRACTOR OF THE PROPERTY OF TH			
TE 215			
ST PALM BEACH, FL 33401			
ddress on our records, enter the name of the new			
SARAH DORFMAN			
ET, SUITE 215			
Enter Florida street address			
H, Florida 33401			
ty Zip Code			
on D. D. D. T.			

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 Pérson(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
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Filing Fee: \$25.00