## 150000 19543

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(City/Si	tate/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to Filin	ng Officer:	

Office Use Only



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## . COVER LETTER

TO: Registration Se Division of Cor			
	BLE REALIZATION LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	MARIE B. CODE, ESQ.		
		Name of Person	<del></del>
	MARIE B. CODE, ESQ.,	P.L.	
	·	Firm/Company	
	1308 SW 27TH TERRAC	E	
		Address	
	CAPE CORAL, FLORIDA	A 33914	
		City/State and Zip Code	
	MARIE@MARIEESQUIR		<del>,</del>
		to be used for future annual report not	flication)
For further information c	oncerning this matter, please c	all:	
MARIE B. CODE		239 829-0063 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address:	
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632	-	The Centre of T	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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

. :10. -7 1... 7:39 AFFORDABLE REALIZATION LLC

( <u>Name of the Limited Liability Compa</u> (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company lorida document number $\frac{L15000019543}{L15000019543}$ .	were filed on FEBRUARY 2, 2015 and assigned	
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
nter new principal offices address, if applicable:	10685-B HAZELHURST DRIVE	
Principal office address MUST BE A STREET ADDRESS)	#28468	
	HOUSTON, TEXAS 77043	
nter new mailing address, if applicable:	10685-B HAZELHURST DRIVE	
Mailing address MAY BE A POST OFFICE BOX)	#28468	
	HOUSTON, TEXAS 77043	
. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, enter the name of the new regi	
New Registered Office Address:		
	Enter Florida street address	
	, Florida	

## ì

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 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>	Address	Type of Action
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AMENDMENT SHOULD REFLECT THE CH	ANGE IN ADDRESS FROM 5781 LEE BLVD. #208-107,
LEHIGH ACRES, FL 33971 TO THE FOLLO	WING NEW ADDRESS: 10685-B HAZELHURST DRIVE,
#28468, HOUSTON, TEXAS 77043.	
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ive date, if other than the date of filing:	(optional) not be prior to date of filing or more than 90 days after filing.) Pursuant to 605
	the applicable statutory filing requirements, this date will not be liste
•	
rd specifies a delayed effective date, but not an eled.	ffective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
SEPTEMBER 29 20	20
· 0	

Typed or printed name of signee