# L15000169133

(Re	equestor's Name)	<u></u>
(Ad	ldress)	<u>.</u>
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(Cit	ty/State/Zip/Phone #	()
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## **COVER LETTER**

Division of Corporations
SUBJECT: AMERICAS INTERNATIONAL REALTY, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
JESSIE TORRES, ESQ.  Name of Person
Firm/Company
1044 LENOX AVENUE Address
Address
MIAMI BEACH, FL 33139
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tessie tacles  at (954) 536-5202  Name of Person  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\times \text{Solon Filing Fee} \text{Certified Copy (additional copy is enclosed)}\$\$\$ Certified Copy (additional copy is enclosed)

### 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

AMERICAS INTERNATIONAL REALTY, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>415000169133</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

#### 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

Florida

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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MER	Juan Orellana	407 Lincoln ROAD	<b>\</b> Add
		Suite 12-D	☐ Remove
		MIAMI BEACH, FL 3313	Change
			:Add
			☐ Remove
			Change
			Add
			□ Remove
			Change
			🗆 Add
			Remove
		- AL FRANCE	Ghange
			Remove-
			□ Remove
			☐ Change

	AD'D MEMBER
	LUCIE GUSTIN
	17 AVENUE GABRIEL PERI
	94300 Vincennes
	CHANGE MEMBER PADICA ZIVIC to SIMPLY
	A Member of THE LLC
ective	date, if other than the date of filing: (optional)
effecti	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
	s's effective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier oth day after the record is filed.
ad.	November 10th 2015
	November 10th, 2015  Justin Jeun Esquire/Registered agent  Signature of a member of authorized representative of a member
	Signature of a member or authorized representative of a member
	TESSIE TOYCES  Typed or printed name of signee

Filing Fee: \$25.00