(Reque	estor's Name)	
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(Document Number)		
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MAR 0 1 2016 S. YOUNG

## **COVER LETTER**

TO: Registration Division of	Section Corporations				
AREA I	REALTY OF CENTRAL FLORII	DA, LLC			
SUBJECT.	Name of Lin	ited Liability Company	·		
The enclosed Articles	of Amendment and fee(s) are sub	emitted for filing.			
Please return all corre	spondence concerning this matter	to the following:			
	CHARLES N. ALEXANI	DER			
		Name of Person			
				 Ø	20 20 20
		Firm/Company		で で で	RET
	5569 W. GULF TO LAKI	EHWY		29	1885 1887 1987 1987
		Address		:0 ::4	MSE 크
	CRYSTAL RIVER, FL 34			ကာ ကို	
	CHARLIE@ALEXRE.CO	City/State and Zip Code M		2	521 () 325
	•	to be used for future annual report notific	ation)		
For further information	on concerning this matter, please of	all:			
JOSEPH N ALEXAI	NDER	352 795-6633			
Nar	ne of Person		elephone Number		
Enclosed is a check for	or the following amount:				
\$25.00 Filing Fee	<del>-</del>	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Stat Certified Copy (additional copy is end		

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

AREA REALTY OF CENTRAL FLORIDA, 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 FEBRUARY 15, 2016 and assigned Florida document number L16000031161 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 "LI.C" or the abbreviation "L. 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 . Florida

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 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
MGRM	JOSEPH NOAH ALEXANDER	5569 W. GULF TO LAKE HWY	<u></u> Add
		CRYSTAL RIVER, FL 34429	☐ Remove
			☐ Change
			□ Add
			□ Remove
			ASSEE ZUSE
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Note:	ve date, if other than the date of filing:	o 605.0 e listed	0207 (3) I as the
ne red The	ford specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the $\epsilon$ 90th day after the record is filed.	arlie	r of:
Dated	FEBRUARY 25 , 2016 .		

Page 3 of 3

Filing Fee: \$25.00