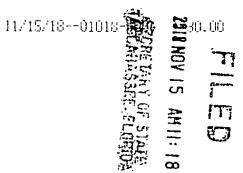


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COVER LETTER

SUBJECT:	Tavera F	Real Estate, LLC		
	Name of Limi	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are subt	nitted for filing.		
Please return all correspo	ondence concerning this matter t	to the following:		
	Ruvilenis Tavera			
	Tavera Real Estate, LLC	Name of Person		
	1900 N Bayshore Dr Apt 3.	Firm/Company 314		
	Miami FL, 33132	Address		
	TuInmuebleMiami@Gmail.			Zais Nov I
For further information c	E-mail address: (i oncerning this matter, please ca	o be used for future annual report notificall:	eation)	္ က ႏွ
Ruvilenis Tavera		954 496-6894 at ()		ANIII: 18
Name o	f Person		Telephone Number	₹ 1 8
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 F Certificate of S Certified Copy (additional copy is	Status & 7

MAILING ADDRESS:

Registration Section

Division of Corporations

TO:

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

Tavera Real Estate, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed onFebruary 19, 2016	and assigned
This amendment is submitted to amend the following:		
A If amending name, enter the new name of the limited liab	ility company here:	
11 Real Estate Miami, LLC		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	1900 N Bayshore Dr #3314 Miami Fl	., 33132
	1900 N Bayshore Dr #3314 Miami Fl	., 33132
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:		The name of the
new negative office Address.	Enter Florida street address	Om o
	Florida	
	City	Zip Code

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = M $AMBR = M$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Change
			Remove
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record specifies a delay The 90th day after the re			ot an effect	ive time, at	12:01 a.r	n. on	the e	arlier
red November 13		. 2018	· ·					
	Signature of o	member or sut	oue o	itative of a memb	er			
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Page 3 of 3

Filing Fee: \$25.00