L22000124399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

300411500763

07/05/23--01033--005 **60.00

FILED
2023 JUL -5 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FL

R. HUNT
07/05/23

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: RML Real Estate, PLLC
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:

Roberta M. Leany
Name of Person

RML Real Estate, PLLC
Firm/Company

221 Jefferson Ave APT 1
Address

MIAMI BEACH FL 33139
City/State and Zip Code

robertamleany@gmail.com
E-mail address: (to be used for future annual report notification)

FILED
2021 JAN -5 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Roberta Leany at (305) 393 2738
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION
OF

RML REAL ESTATE, PLLC

(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 06/28/2023 and assigned Florida document number L22000124399.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ROBERTA MORBIDELLI LEARY, PLLC

The new name must be distinguishable and contain the words "Limited Liability 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)

221 JEFFERSON AVE APT 1
MIAMI BEACH, FL 33139-7011

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

221 JEFFERSON AVE APT 1
MIAMI BEACH, FL 33139-7011

FILED
2023 JUN 28 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: ROBERTA MORBIDELLI LEARY

New Registered Office Address: 221 JEFFERSON AVE APT 1
Enter Florida street address

MIAMI BEACH, FL, **Florida** 33139-7011
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 w provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with a accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docume 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.

Roberta Leary

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
		N/A	☐Change
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change
			☐Add
			☐Remove
			☐Change

FILED
2021 JAN -5 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FL

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Just changing the name of my business and the address.

Thank you,
Roberta

FILED
2023 JUN -5 PM 2:03
SECRETARY OF STATE
TALLAHASSEE FL

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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 605.0207 (3

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as th document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JUNE 28TH, 2023

Roberta Leary
Signature of a member or authorized representative of a member

ROBERTA MORBIDELLI LEARY
Typed or printed name of signee