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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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04/01/13--01022--022 **£5.00

COVER LETTER

FLORIDA SUBJECT:	TOP REALY LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	2
Please return all correspondent	ondence concerning this matter	to the following:	
	ANNA CHENG CHEUNG	G	2010 APR - I
		Name of Person	The T
	FLORIDA TOP REALTY	LLC	ь 27 Таал
		Firm/Company	
	4700 MILLENIA BOULE	EVARD SUITE 175	
		Address	
	ORLANDO, FL 32839		
	FLORIDATOPREALTY@		
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	
ANNA CHENG CHEU?	NG	407 73 19938 at ()	
Name o	f Person		Telephone Number
Enclosed is a check for the	he 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 carclesed)

MAILING ADDRESS:

TO:

Registration Section
Division of Corporations

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

FLORIDA TOP REALTY LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our record ited Liability Company)	7)
The Articles of Organization for this Limited Liability Comp	pany were filed on 03-15-2019	and assigned
Florida document number L19000074006		,
This amendment is submitted to amend the following:		7810 7
A. If amending name, enter the new name of the limited	liability company here:	APR -1
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		¥. N
Enter new mailing address, if applicable:	4700 MILLENIA BOULEVAL	RD
(Mailing address MAY BE A POST OFFICE BOX)	SUITE 175	
	ORLANDO, FL 32839	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent:		, enter the name of the ne
New Registered Office Address:	Enter Florida street addres.	3
	EL	orida
	City . F Ic	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, 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>	<u>Address</u>	Type of Action
MGR	ANNA CHENG CHEUNG	4700 MILLENIA BOULEVARD SUITE 175 ORLANDO, FL 32839	■ Add
			□ Remove
			Change
			Remove Control
			
			☐ Remove
			☐ Remove
			Change
			Add
		□ Remove	
			Change
			□ Remove
			☐ Change

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Effective date, if other than th	e date of filing:	(optional)	
Note: If the date is listed, the date in Note: If the date inserted in this I document's effective date on the	ast be specific and cannot be prior to date of filing of block does not meet the applicable statutory fi Department of State's records.	or more than 90 days after filing.) Pursuant to iling requirements, this date will not be	o 605.020 e listed as
he record specifies a delaye The 90th day after the re	ed effective date, but not an effectiv cord is filed.	e time, at 12:01 a.m. on the e	arlier o
Dated MARCH 26	2019		
	(Sund)		
	Signature of a member or authorized representat	ive of a member	_

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00