

LOS000028035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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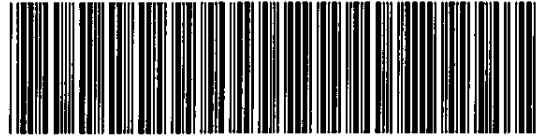
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

LOS-28035  
QR

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** R.E.L. PARTNERS 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:

EYAL PERETZ

(Name of Person)

R.E.L. PARTNERS LLC

(Firm/Company)

3215 NE 184TH STREET, #14213

(Address)

AVENTURA, FL 33160

(City/State and Zip Code)

For further information concerning this matter, please call:

EYAL PERETZ

(Name of Person)

at ( 305 ) 321-5131

(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/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

R.E.L. PARTNERS LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 03/21/2005 and assigned  
document number L05000028035.

**SECOND:** This amendment is submitted to amend the following:

Article V is here by amended and replaced with the following:

Article V

The name and address of the managing members/managers are:

Title: MGRM

Eyal Peretz

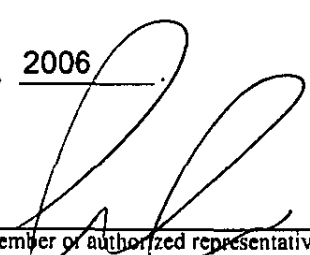
3215 NE 184TH Street, Suite 14213, Aventura, FL 33160

Title: MGRM

Ronete Peretz

3215 NE 184TH Street, Suite 14213, Aventura, FL 33160

Dated October 27, 2006

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

EYAL PERETZ

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

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