

W5000051827

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

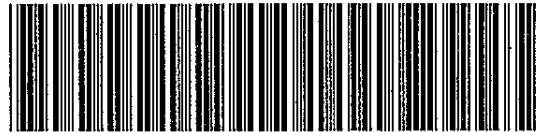
Special Instructions to Filing Officer:

10/7

amend

W05-51827

Office Use Only



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10/07/05--01059--004 **25.00

M. HODGES

FILED
05 OCT -7 PM 2:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Assurance Realty 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:

Andy Torres
(Name of Person)

Assurance Realty LLC
(Firm/Company)

2121 NE 185th St.
(Address)

North Miami Beach FL 33179
(City/State and Zip Code)

For further information concerning this matter, please call:

Andy Torres at (305) 796-0831
(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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Assurance Realty LLC.

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 05/25/05 and assigned document number L05000051827

SECOND: This amendment is submitted to amend the following:

Street Address of Principal Office to be change to:
3600 S. State Rd 7 # 233
Miramar, FL 33023

Mailing, Street address of registered agent
and address of managing members to
be change to:

2121 NE 185th St.
NMB, FL 33179

Dated 10/01/2005.



Signature of a member or authorized representative of a member

Andy Torres

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE FLORIDA

05 OCT -7 PM 2:28

FILED