

L05000074489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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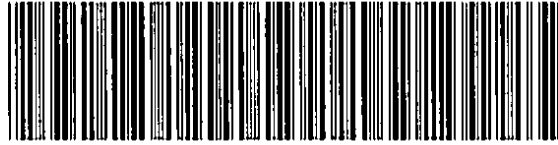
(Business Entity Name)

(Document Number)

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2019 FEB 28 PM 6:57  
STATE OF FLA  
TALLAHASSEE, FLORIDA

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UHS  
3-8-19

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ciba Real Estate 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:

Jessica Fuller  
Name of Person

Fuller Real Estate Group LLC.  
Firm/Company

2614 SW 8th Street  
Address

Miami, FL 33135  
City/State and Zip Code

Jessica\_Fuller@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Fuller at (305) 302-8217  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

Ceiba Real Estate LLC.

(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 07/29/2005 and assigned Florida document number LO5000074489

This amendment is submitted to amend the following:

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

Fuller Real Estate Group LLC.

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)**

2614 SW 8<sup>th</sup> Street

Miami, FL 33135

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2614 SW 8<sup>th</sup> Street

Miami, FL 33135

**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:

Jessica Fuller

New Registered Office Address:

2614 SW 8<sup>th</sup> Street

Enter Florida street address

Miami

City

Florida

33135

Zip Code

**New Registered Agent's Signature, if changing Registered Agent:**

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>	<u>Type of Action</u>
<u>MGR</u>	<u>Miriam Fuller</u>	<u>6900 Maynada Street</u>	<input checked="" type="checkbox"/> Add
		<u>Coral Gables, FL 33146</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>MGR</u>	<u>Jessica Fuller</u>	<u>2614 SW 8th Street</u>	<input type="checkbox"/> Add
		<u>Miami, FL 33135</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

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

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SEC. CLERK OF SUPREME COURT  
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: April 07, 2019 (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)(b)

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

f 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 February 25, 2019

  
Signature of a member or authorized representative of a member

Jessica Fuller  
Typed or printed name of signee