L05000090823

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B. KOHR
FEB 14 2012
EXAMINER



600221676416

02/13/12--01036--026 **25.00

COVER LETTER

Division of Corporation		
SUBJECT: NUNE	EZ REALTY LLC	
	Name of Limited Liability Company	``
The enclosed Articles of Amenda	ment and fee(s) are submitted for filing.	
Please return all correspondence of	concerning this matter to the following:	
	PEDRO VALDEZ	
-	Name of Person	
	C/o Maria NuNez Firm/Company	
	_	
	ISI ALLEN ST. # 50	
	Addross	
	New York M/ 10002	
	New YOTK M 1000Z PEDVAL 427; @ MNS; COM	
; · · · · ·	E-mail address: (to be used for future annual report notification)	
For further information concerning	ig this matter, please call:	
PEDRO VALDEZ	at \	
Name of Person	Area Code & Daytime Telephone Number	
,		
Enclosed is a check for the follow		
	0.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
MAILING ADI Registration Sec Division of Corp P.O. Box 6327	ction Registration Section	
	32314 1 suc action on the control of 2661 Executive Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NUNEZ BEALTY 110

	NVNEZ ILEVILIT				
	(Name of the Limited Liability Company as i (A Florida Limited Liability	t now appears on our records.)	J, *		
.1.1	co /1.1				
47		filed on 914165 and	l assigned		
•	Florida document number L05 0000 908 23		assigned.		
	r fortua document number				
	This amendment is submitted to amend the following:	,			
	A. If amending name, enter the new name of the limited liability co	ompany here:			
	NUNEZ REALTY II The new name must be distinguishable and end with the words "Limited Lize"	bility Company "the decignation "I I C" or t	the abbreviation		
•	"L.L.C."		_		
	Enter new main since of the address (6 and 1)	50 PURSLANE Pass EVENPORT FL 3389	F CASALOS		
	Enter new principal offices address, if applicable:	JO TURS LUNE TUSS	7001 90 1021		
	(Principal office address MUST BE A STREET ADDRESS) D	ENDOLI LC 3381			
	Enter new mailing address, if applicable:	151 Allen ST			
	(Mailing address MAY BE A POST OFFICE BOX)	151 Allen ST UNIT SD New York M	:		
No. V.ck N			10003		
					
	B. If amending the registered agent and/or registered office ac	ddress on our records, enter the nam	e of the new		
	registered agent and/or the new registered office address here:				
		/•			
	Name of New Registered Agent: PEDRU	VALDEZ			
	150 Ru	Island Pass Four Cor	anter c		
New Registered Office Address: L50 VVS Law 1955 Four WINES Enter Florida street address					
	D — M 2 2 2 2 7				
	DaveNPORT Florida \$33897				

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 608, 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.

City

A Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** Name 1 <u>Address</u> Type of Action MARIA NWEZ □ Add □ Add Remove ☐ Add Remove Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ___FW 2012, Signature of a member or authorized representative of a member PEDRO VALDEZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00