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COVER LETTER

TO: Registration Section Division of Corporations	<u>-</u>
SUBJECT: Florida Really (Name of Limited	Group LLC I Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Revisa Levin (Name of Person)	-
Benisa Levin PA (Firm/Company)	
1900 PW Corporate Blv. (Address)	1., Str. 400E
Boca Raton, 5233431 (City/State and Zip Code)	OF STATE
For further information concerning this matter, ple	ase call:
Name of Person) at ((Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (8/05)

STATEMENT, OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is:	rida Realty Group, LLC.
2. The mailing address of the limited liability company is	: 19234 Inkword Ct., .
Boca Daton	
9/12/2005	_L050001091804
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the registered office Florida Department of State: Benisa Levin Name	-
500 Southeart f Address Ft. Lande deie City, State and	of St Ste 100
6. The name and address of the new registered agent and/o	or office:
Boca Raton FL City, State and Z	33 Y31 PA 1: 3
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization
(Signature of a member or authorized representative of a member)	
Benisa Levih (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the praid I am familiar with and accept the obligations of my package of the following the companies of the process of the province of the pr	ngree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office y has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00