105000/15898

(Re	equestor's Name)
(Ac	ddress)
(Ac	ldress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: CAMARGO REAL ESTATE DEVELOPMENT, 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:
PAUL CAMARGO Name of Person
CAMARGO REAL ESTATE DEVELOPMENT, LLC
1911 SW 80TH ST
OCALA, FL 34476 PAULIZZY@ COX NFT
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PAUL CAMARGO at (352) U29-U977 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \ \ \times \ \ \times \ \ \times \ \times \ \times \ \times \ \times \ \ \times \ \ \times \ \times \ \ \times \ \times \ \ \times \ \ \times \ \ \times \ \ \times \ \ \times \ \

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

CAMARGO REALESTATE DEVELOPMENT, 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 12	- 05 2005 and assigned	
Florida document number <u>105060115898</u>			
This amendment is submitted to amend the following:			
da document number LOSOCO 115898 amendment is submitted to amend the following: amending name, enter the new name of the limited liability company here: we name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." It new principal offices address, if applicable: cipal office address MUST BE A STREET ADDRESS) If amending address, if applicable: ling address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new tered agent and/or the new registered office address here: Name of New Registered Agent:			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the desig		_
Enter new principal offices address, if applicable:		9 17 T	FI-
(Principal office address MUST BE A STREET ADDRESS)		JUL 3	=
Entar now mailing address if applicables	<u> </u>	or control	ED
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registered agent and/or the new registered office address her		ur records, <u>enter the name of the</u>	<u>: new</u>
Name of New Registered Agent:			_
New Registered Office Address: Enter Florida street address		street address	
		, Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
I hereby accept the appointment as registered agent and ag	ree to act in this cap	pacity. I further agree to comply wit	h the

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 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> Name | <u>Address</u> Type of Action MBR MARYE. CAMARGO 1911 SW 80TH ST XAdd

OCALA FL 34476 DREMOVE ☐ Change ☐ Change _□ Remove □ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove

_□ Change

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Note:	ive date, if other than the date of filing: 08/01/2017 (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date vent's effective date on the Department of State's records.	
he re The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. of 90th day after the record is filed.	on the earlier of:
Dated	JULY 24 . 2017. Real E Conough Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	
	PAUL CAMARGO	

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Filing Fee: \$25.00