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COVER LETTER

Division of Corp	porations		
FLORIDI	AN FIRST REALTY GF	ROUP, LLC	
	Name of Lim	ited Liability Company	
			,
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	OBETA DEED MO	D	
	GRETA DEEB - MG		
		Name of Person	
		Firm/Company	
	2350 CORAL WAY,	SUITE 402	
	·	Address	
	MIAMI, FL 33145		
		City/State and Zip Code	
	GRETA@FLORIDIAI		
	E-mail address: (to be used for future annual report notific	cation)
For further information co	oncerning this matter, please ca	all:	
GRETA DEEB		305 854-2663	
Name of	Person		l'elephone Number
Enclosed is a check for th	e 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:

TO:

Registration Section

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDIAN FIRST REALTY GROUP, LLO		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v Florida document number <u>L06000031091</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and end with the words "Limited Liabil	ity Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	No. of the last of	
	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u>.</u>
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:		the name of the nev
Name of New Registered Agent:		ĀS
New Registered Office Address:		CR A
	Enter Florida street address , Florida	V 25
	City	CZip Co
New Registered Agent's Signature, if changing Registered Agent:	:	S S S
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	performance of my duties, and I am	familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	RICHARD DEEB	2350 CORAL WAY, SUITE 401	_ Add
		MIAMI, FL 33145	Remove
MGR	GRETA DEEB	2350 CORAL WAY, SUITE 401	■ Add
		MIAMI, FL 33145	Remove
			□ Remove
			Add None 25 SECRETARY TALLAHASS
			STATE And Remove
			Add
			Remove

If amen	iding any other information, en	ter change(s) here: (Attach ad	ditional sheets, if necessary.)
' —			
		.	
			· · · · · · · · · · · · · · · · · · ·
	re date, if other than the date of tive date must be specific, cannot be pric this document is filed by the Florida Dep		(optional) anot be more than 90 days after
Dated N	NOVEMBER 24	2014	
Dated _		Wille	
	Signatu	e of a member or authorized represent	ative of a member
	RICHARD DEEB	Typed or printed name of sign	

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STABLE. SECRETARY OF STABLE.