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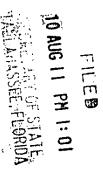
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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT:	SOLDIVA	REALTORS, LLC			
SUBJECT:		ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corre	spondence concerning this matter	r to the following:			
	Alejano	Alejandra Clifford & Ligia J. Ferrer			
		Name of Person			
	SOLDIVA REALTORS , LLC				
	Firm/Company				
	11031 SW 153 ST				
		Address			
		Miami, Fl 33157			
		City/State and Zip Code			
		x.clifford@bellsouth.net to be used for future annual report notification	n)		
For further informatio	n concerning this matter, please o	·			
Alejandra	Clifford & Ligia J. Ferrer	at (_786_) 291	-2821		
Nam	e of Person	Area Code & Daytime Tele	phone Number		
Enclosed is a check fo	r the 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)		
Reg Divi P.O.	istration Section sion of Corporations Box 6327 ahassee, FL 32314	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center of Tallahassee, FL 32301	s		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Clifford & A	<u>Issociates Real Estate, </u>	LLC		
(<u>Name of the Limited Lial</u> (A Flo	bility Company as it now appears rida Limited Liability Company)	s on our records.	温 也 小	
`	• • • • • • • • • • • • • • • • • • • •			
The Articles of Organization for this Limited Liabili	ity Company were filed on	11/29/2006	and assigned	
Florida document number L06000114404	<u>4</u>		and assigned	
			20,0	
This amendment is submitted to amend the following	ıg:		A POLICE	
A. If amending name, enter the new name of the	limited liability company here	:		
SOLI	DIVA REALTORS, LLC			
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Compar	y," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable	:			
(Principal office address MUST BE A STREET A	DDRESS)			
				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>			
B. If amending the registered agent and/or r		ur records, <u>ente</u>	the name of the new	
registered agent and/or the new registered office	address nere:			
Name of New Registered Agent:				
New Registered Office Address:				
·	Enter Florida street address			
		, Florida		
_	City		Zip Code	

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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Mar MGRM = M	nager lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Ligia J. Ferrer	441 Collins Av #28 Miami Beach Florida 33139	Add Remove
			Add Remove
			Add Sp. Remove
			- Bemove
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
D. If amend	ing any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)	_
			_
	August 9th		_
	Signature o	of a member or authorized representative of a member	.,. · · · · · · · · · · · · · · · · · ·
		Alejandra Clifford Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00