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EXAMINER

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SECRETARY OF STATE

1 IN 18 PH 12:

COVER LETTER

TO: Registration Sec Division of Corp			r
SUBJECT:	Nan Roya (Name of Lin	ne Change! LX Realty Lic nited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspon	ndence concerning this matter	r to the following:	
	Karen	(Name of Person)	
	ροι	(Firm/Company)	veword)
	3842	NE 199 Terrace (Address)	<i>>,</i>
	a	venture, FL. 33 (City/State and Zip Code)	180
For further information co	ncerning this matter, please of	call:	
Yaren (Name of	Dornbusch Person)	at (305) 773 9 (Area Code & Daytime	1470 Telephone Number)
Enclosed is a check for 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)

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

	ial K Realty LL	C
(Name of the Limited I (A)	Liability Company as it now approved Limited Liability Company	pears on our records.) ny)
The Articles of Organization for this Limited Lia	bility Company were filed on _	January 16, 200 and assigned
Florida document number <u>L 0 7 0000 05</u>	:33 <u>9.</u> .	
This amendment is submitted to amend the follow	wing:	
A. If amending name, <u>enter the new name of</u>	the limited liability company	here:
The new name must be distinguishable and end with	ousch LLC	
Ch.L.C." B. If amending the registered agent and/or the new registered offi	· r registered office address o	
Same: Name of New Registered Agent:	Richard Wo	Ife; Esq.
New Registered Office Address:	100 SE Seco	end Street -3300 (Enter Florida street address)
	Miami, FL	33/3/, Florida(Zip Code)
	(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.

		••9
(If Changing Registered Agent, Signs		ent)
		h-Augus J
Page 1 of 2		70.20
	PMI2: OF STA S.FLOR	į.,,,,

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 <u>Name</u> **Type of Action** Title **Address** ☐ Add Remove Add Remove Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Karen Dornbusch
Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00