

LO7000030453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

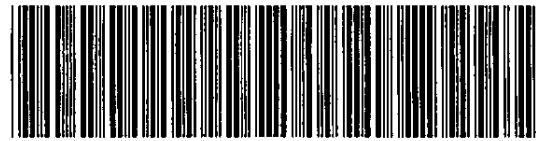
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 OCT 12 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

OCT 13 2016



Delivered Via Overnight Delivery

October 11, 2016

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301


Re: Articles of Amendment to Articles of Organization

To whom it may concern:

Attached please find the Articles of Amendment to the Articles of Organization for Absolut Commercial Realty, LLC. We need this to be processed as soon as possible. I will contact your office to see how long this process takes and how long it will take to get a copy of the filed Amendment.

Your prompt attention to this matter is sincerely appreciated.

Regards,


Gella Guillen
Director Operations

CG

Encls.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ABSOLUT COMMERCIAL REALTY 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:

CELIA GUILLEN
Name of Person

ABSOLUT COMMERCIAL REALTY LLC
Firm/Company

9830 SW 77 AVE #130
Address

MIAMI FL 33156
City/State and Zip Code

celia@absolutfinancial.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CELIA GUILLEN at (305) 274 7467
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$25.00 Filing Fee	<input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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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

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16 OCT 12 AM 9:16
TALLAHASSEE, FL
SECRETARY OF STATE

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

ABSOLUT COMMERCIAL REALTY 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 3/21/2007 and assigned Florida document number L07000030453.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ALBERTO ROMERO	9830 SW 77 AVE #130	<input type="checkbox"/> Add
		MIAMI FL 33156	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JESUS SUAREZ	9830 SW 77 AVE #130	<input checked="" type="checkbox"/> Add
		MIAMI FL 33156	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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OCT 2 19 16
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 10/11 01/11, 2016

Signature of a member or authorized representative of a member

JOSE L. GUILLEN
Typed or printed name of signee

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TALLAHASSEE, FLORIDA