

108000001675

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT
JAN 26 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: REALTY 20/20, 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:

Demetris Aspromallis

Name of Person

REALTY 20/20, LLC

Firm/Company

775 SW Munjack Circle

Address

Port St. Lucie, FL 34986

City/State and Zip Code

demetrisaspromallis@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Demetris Aspromallis

at (772) 528-9775

Name of Person

Area Code

Daytime 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

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17 JAN 25 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REALTY 20/20, LLC

The Articles of Organization for this Limited Liability Company were filed on 01/07/2008 and assigned Florida document number L08000001675.

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SECRET
JUN 25 1997
FBI
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D.C. 20535

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Article III is hereby deleted in its entirety and the following paragraph is added in replacement thereof:

Article III

The purpose for which this Limited Liability Company is organized is to engage in any and all any lawful

business for which a limited liability company may exist under the laws of the State of Florida.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated January 24, 2017

Demetris Aspromallis
Signature of a member or authorized representative of a member

Demetris Aspromallis

Typed or printed name of signee

FILED
JAN 26 PM 3:01
STATE OF FLORIDA
TALLAHASSEE