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EXAMINER

COVER LETTER

TO: Registration S Division of Co		
SUBJECT:	PROVIDENCE REALTY COMPANIES, LLC Name of Limited Liability Company	
The enclosed Articles o	of Amendment and fee(s) are submitted for filing.	
Please return all corresp	pondence concerning this matter to the following:	
	JULIO RIVERA	
	Name of Person	,
	PROVIDENCE REALTY COMPANIES, LLC	
	Firm/Company ·	
	240 CRANDON BOUELVARD SUITE # 228	
	Address	~ ~
	KEY BISCAYNE, FL 33149	
	City/State and Zip Code	
	ALOPEZ@PROVCOS.COM	
	E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please call:	
	JLIO RIVERA at (786) 8665824 E	
IABILIE	of Person Area Code & Daytime Telepho	ne Number
Enclosed is a check for	the following amount:	
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)	660.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

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

PROVIDENCE REALTY COMPANIES, 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 Liabil	lity Company were filed on	FEBRUARY 4, 2008	_ and	assign	.ed
Florida document number L0800001222					
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liability company	here:			
PROVIDEN	CE REALTY ADVISOR	RS, LLC			
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Co	ompany," the designation "LLC	or tl	he abbr	eviation
Enter new principal offices address, if applicable	e:		ាក្ត ការ៉ា	2012	
(Principal office address MUST BE A STREET A	DDRESS)	2		壓	17
	<u> </u>		Ē		R-mas.
•		÷.	10 Y	>eg	17
Enter new mailing address, if applicable:	· 	•••	(A)	Z	All advances
(Mailing address MAY BE A POST OFFICE BO)	<u>`</u>			1	
			•	45.7)	
B. If amending the registered agent and/or registered agent and/or the new registered office		on our records, <u>enter the</u>	name	e of t	ne new
Name of New Registered Agent:					
New Registered Office Address:					
		Enter Florida street address , Florida			
_					
	City		Zip Co	ode	

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 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>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ANTONIO BUZANELI	240 CRANDON BOULEVARD SUITE # 228 KEY BISCAYNE, FL 33149	✓ Add Remove
MGR_	JULIO RIVERA	240 CRANDON BOULEVARD SUITE # 228 KEY BISCAYNE, FL 33149	Add Remove
MGRM	YEFREI MUSA	240 CRANDON BOULEVARD SUITE # 228 KEY BISCAYNE, FL 33149	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary.	2012 BER
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 Dated	MARCH 16		E
	O	JULIO RIVERA	· · · · · · · · · · · · · · · · · · ·
	Тур	ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00