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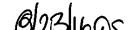
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# **COVER LETTER**

TO: Registration S			
Division of Co	rporations PECT REALT	TY ILe	
SUBJECT:		ited Liability Company	
	Name of Lim	nted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	,
r tease return an corresp			/
	יחוע	Name of Person	<u> </u>
	_		•
	ASPECT	REALLY LL	- <u>C</u> -
		Firm/Company	_
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	150 cat f	4HON FL	· 33433
	/ · · · · — -	City/State and Zip Code	
	DANNY HERM	NON THE SMA	16, com
	E-mail address: (	to be used for future annual report notif	fication)
For further information	concerning this matter, please ca	all:	_
~ 1. / 1. M	HARMON		+ 8134
ALLIN W.			
Name (	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	☑ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy	Certificate of Status &
	b.	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
	V·		
BA A II	INC ADDRESS.	STDEET/COUD!	ED ADDDESS.

### 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

HSPECT REALT	t LLC		
( <u>Name of the Limite</u>	d Liability Company as it now appe A Florida Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Lia Florida document number 人の多のの		07/11/2	and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liability company l	<u>here</u> :	
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the	designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		
			TSE O
			京 · 图 · 图
Enter new mailing address, if applicable:			瑟二二
(Mailing address MAY BE A POST OFFICE B			SET 0
11111111 WWW. 1111 WW. 111 WW.	<u></u>		30
	Martin		22 :
B. If amending the registered agent and/o registered agent and/or the new registered offi		n our records, <u>ente</u>	r the name of the new
Name of New Registered Agent:			
1000 411			
New Registered Office Address:	Enter Fl	lorida street address .	<del>,</del>
		, Florida _	
	City		Zip Code
New Registered Agent's Signature, if changing Re	egistered Agent:		
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the re company has been notified in writing of this c	r and complete performance of tered agent as provided for in egistered office address, I hero	of my duties, and I am Chapter 605, F.S. O	familiar with and r, if this document is

Page 1 of 3

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

Title	Name	Address	Type of Action
AMBR	DANN HERMON	7-120 VIA MARBELLA BOCA RATION FL 33	<u>4</u> ₩ Add <b>433</b>
			Remove
			Change
MGR	KAPLAN, SONARO. J	BOLD ROTTON FE 3545	Add
			<b>E</b> Remove
			Change
<del></del>			□ Add
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		1	Renewe T
			Sarchange
<del></del>			Fladd 2
			Remove
			Change
			□ Add
			_□ Remove
			□ Change

Effective date, if other than the date of filing:  S. // Jo // Goptional)  fan 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.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The 90th day after the record is filed.  Signature of a member or authorized representative of a member  HERM ON DALWY  Typed or printed name of signee  Page 3 of 3  Filing Fee: \$25.00	mending any other i	nformation, enter	change(s) here: (			
Effective date, if other than the date of filing:  8. // Jac/6 (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.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie and the sound of a member of authorized representative of a member of a				<u> </u>		
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