# L090000 77413

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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15 JUL -7 PM 3: 04

SECRETARY OF STATE
SECRETARY OF STATE

My come

# **COVER LETTER**

Division of Corp	orations '		
SUBJECT: A	BC Real He Name of Limite	olding 5, LLC ed Liability Company	
	Amendment and fee(s) are subm	-	
riease return an correspor	ndence concerning this matter to	the following:	
,	Rachel	Name of Person	
	ABC Real	Holdings, LLC	
	5301 N.	Federal Hwy, Address	5ulte 185
	Boca Rat	ON FL 33487 City/State and Zip Code a (eal, com	!
	E-mail address: (to	be used for future annual report notifi	ication)
For further information co	ncerning this matter, please call		
Ray Name of	Person	at (561) 807 - Area Code Daytime	Telephone Number
Enclosed is a check for the	e 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:

TO:

Registration Section

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

# ARTICLES OF ORGANIZATION FILED OF

ABC Real Holdings,	LLC15 JUL -7 PM 3: NL
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	uny as it now appears on our records.) Liability Company IAHY OF STATE IALLAHASSEE. FLORIDA
The Articles of Organization for this Limited Liability Company	were filed on 8/12/2009 and assigned
Florida document number <u>L0900077413</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
N/A The new name must be distinguishable and contain the words "Limited Liabi	lity Company " the designation of LC" as the abbasistics of LC"
the new name must be distinguishable and comain the words. Elimited Liabi	
Enter new principal offices address, if applicable:	5030 Champion Blud Suite 611-234 Boxa Ration, FL 33496
(Principal office address MUST BE A STREET ADDRESS)	Boca Katon, FL 33496
Enter new mailing address, if applicable:	5301 N Federal Huy, Suite 185 Boxi Raton, FL 33487
(Mailing address MAY BE A POST OFFICE BOX)	Box Raton, FL 33487
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, enter the name of the new e:
Name of New Registered Agent: N/A	
New Registered Office Address: 530	- N Federal Hwy, Suite 190 Enter Florida street address
Boca	Raton , Florida 33487  City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

### 1

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>	Name	Address	Type of Action
MGRM	Mia Real Rentals, LLC	5301N Foderal Hosy, Suite 19 Boca Ration, FL 33487	<u>75</u> □ ∧dd
		Boca Ration, FL 33487	🗖 Remove
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fectiva	e date, if other than the date of filing: N/A (optional)
an effect	tive 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 605.02
ocumen	'the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at's effective date on the Department of State's records.
	ASE 5
reco	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. and the earlier out day after the record is filed.
ine 9	
d	June 25, 2015.
atea	0000 4 )
	Signature of a member or authorized representative of a member
	Avi Stern, as manager of Mia Real Holdings, LLC  Typed or printed name of signee  Which is manager for Mia Real Rentals, LCC
	A(t) =

Page 3 of 3

Filing Fee: \$25.00