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M. THOMAS

NOV 1 7 2009

EXAMINER

COVER LETTER

TO: Registration Section ' ' Division of Corporations	
SUBJECT: MARCUS & RITZ 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:	
Lee Marrero Name of Person	
70 F	はこれに
1/62 NE 91 ST FROM 3	
MIAMI FL 33138 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	
Lee Marrero at (305) 525-0659	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	ŀ
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Corporations Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Tallahassee, FL 32314 Tallahassee, FL 32314	

ARTICLES OF AMENDMENT . TO ARTICLES OF ORGANIZATION OF

Marcus & RTZ	Realty, LL	<u>-</u>		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our d Liability Company)	records.)		
The Articles of Organization for this Limited Liability Compa Florida document number <u>LO9 000 10 3 776</u> .	any were filed on $\frac{10/2}{2}$	7/09 and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited li	iability company here:			
·				
The new name must be distinguishable and end with the words "L "L.L.C."	imited Liability Company," the d	esignation "LLC" or the abbreviation		
		TAS S		
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)		7		
		05 0 M		
		四里口		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		RETE W		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		rds, enter the name of the new		
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 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 Changing Registered Agent, Signature of New Registered Agent

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 ANGEL FERNANDEZ MGR ☐ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Marrero Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00