

L100000 28200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

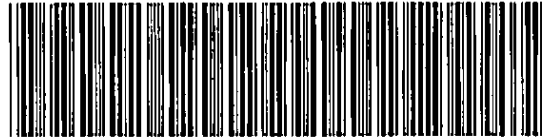
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700345418657

06/03/20--01014--010 ++25.00

FILED

2020 JUN -3 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FL

JUN 19 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INTERACTION 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:

ELVIN VILLALOBOS
Name of Person

Firm/Company

7801 West Commercial Blvd
Address

Tamarac, FL 33321
City/State and Zip Code

elvinremax@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Mohabir at (954) 610-8375
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

INTERACTION REALTY, 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 Liability Company were filed on 03/15/2010 and assigned
Florida document number L10000028200.

This amendment is submitted to amend the following:

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)

FILED
2010 JUN -3 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FL

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:

ELVIN VILLALOBOS

New Registered Office Address:

7801 West Commercial Blvd

Enter Florida street address

Tamarac

City

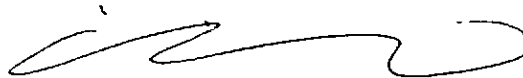
Florida

33321

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>
MGR	JACQUELINE C. ACEVEDO	9407 NW 74 th street	<input checked="" type="checkbox"/> Add
		Tamarac FL 33321	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jresaraine S. Mokabir	5725 NW 76 CT	<input type="checkbox"/> Add
		Tamarac FL 33321	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Jresaraine S. Mokabir	8725 NW 76 CT	<input type="checkbox"/> Add
		Tamarac FL 33321	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	David Mokabir	8725 NW 76 CT	<input type="checkbox"/> Add
		Tamarac FL 33321	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRETARY OF STATE
TALLAHASSEE, FL

2020 JUN -3 PM 2:16

FILED

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

FILED
2020 JUN - 3 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FL

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 June 1st / 2020

Signature of a member or authorized representative

David Mohabir

Typed or printed name of signee

Filing Fee: \$25.00