L1000036085

(Re	questor's Name)	
(Ad	dress)	
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(Cit	:y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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EXAMINER



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Address City/State/Zip Requester's Name Address LSU-SUS Phone #	54	office Use Only
CORPORATION NAME(S) & DOCUMI	ENT NUMBER(S), (II KI	iowii):
1. Black Pearl R (Corporation Name)	(Document #)	vestments,
2. (Corporation Name)	(Document #)	
3. (Corporation Name)	(Document #)	
4. (Corporation Name)	(Document #)	<u> </u>
		
Walk in Pick up time		Certified Copy
Mail out Will wait	Photocopy	Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A. Change of Registere Dissolution/Withdra Merger	ed Agent
OTHER FILINGS	REGISTRATION/QUA	ALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	
		Examiner's Initials

ARTICLES OF AMENDMENT TO * ARTICLES OF ORGANIZATION OF

BLACK PEARL REALTY INVESTMENTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

				و في
The Articles of Organization for this Limited	Liability Company were	filed on	04/02/2010	and assigned
Florida document number L100000	• • •			<u></u>
Fiorita document number	 			
This are a large to the two large and the C	11		,	
This amendment is submitted to amend the fo	ollowing:			
A. If amending name, enter the new name	of the limited liability	company her	<u>e</u> :	•
The new name must be distinguishable and end v "L.L.C."	vith the words "Limited L	iability Compa	ny," the designation "I	LLC" or the abbreviation
Enter new principal offices address, if appl	icable: N/	Α		
(Principal office address MUST BE A STRE	EET ADDRESS)			
Enter new mailing address, if applicable:	<u>N/.</u>	A		
(Mailing address MAY BE A POST OFFICE	<u> </u>			
				
B. If amending the registered agent and		address on o	ur records, <u>enter t</u>	he name of the new
registered agent and/or the new registered	office address here:			
N 6N 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	N/A			
Name of New Registered Agent:	IN/A			
New Registered Office Address:				<u> </u>
	Enter Florida street address			
			, Florida	
	Cit			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 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 Title <u>Name</u> <u>Address</u> **Type of Action** MGR **DENISE HARDY** 10645 NARCOOSSEE ROAD ☐ Add ORLANDO, FL 32829 Remove ☐ Add Remove ☐ Remove ∏ Add Remove ∏Add Remove ∏Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated

signature of a member or authorized representative of a member ALEXANDRE M. MESTDAGH

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00