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S. WARREN
JUN 2 3 2017

COVER LETTER

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		E REAL ESTATE SERVICI	ES, LLC	
SUBJECT: _		Name of Lim	ited Liability Company	
The enclosed ?	Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return a	ll correspond	dence concerning this matter	to the following:	
		CHARLES L STARR		
			Name of Person	
		REALTYONE REAL EST	ATE SERVICES, LLC	
			Firm/Company	
		1626 RINGLING BLVD.	STE 500	
			Address	
		SARASOTA, FL 34236		
			City/State and Zip Code	
		LSTARR@RIA.COM		
		E-mail address: ()	to be used for future annual report noti	fication)
For further info	ormation cor	cerning this matter, please co	ıll:	
KAROLINA V	WIECZORE	Κ	941 387-1200	
	Name of I	Person	at () Area Code Daytim	e Telephone Number
Enclosed is a c	heck for the	following amount:		
■ \$25.00 Fili	ng 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:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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 OF

REALTYONE REAL ESTATE SERVICE		Ann magnests A
(A Flori	ility Company as it now appears on o da Limited Liability Company)	<u>80 (8000)</u>
The Articles of Organization for this Limited Liability	Company were filed on 12/20/2	and assigned
Florida document number 1.10000036368	·	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designa	ntion "ELC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST_BE A STREET ADE	ORESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
maning address may br. A 1 031 071 Tet. boxy		
3. If amending the registered agent and/or reg	•	records, enter the name of th
egistered agent and/or the new registered office ad	idress here:	
Name of New Registered Agent:		
rame or new regimered rigent.		
New Registered Office Address:	Enter Florida st	and orthograph
	r.mer r wraa si.	rvet aaaress
	- CON-	, Florida Zw Code
	City	zīp (oae

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 emply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiate 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 lighting 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, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

MGR = N $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			□ Change
			Remove
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	late of filing:		(optional)	
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Filing Fee: \$25.00