LIMODOUSTA

(Reques	tor's Name)	
•	,	
(Address	5)	
(Address	s)	
(City/Sta	te/Zip/Phone #	<i>‡</i>)
PICK-UP	WAIT	MAIL
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Certified Copies	Certificates of	of Status
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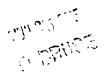
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2015 JUN 24 A II: 40
SECRETARY OF STATE
AND ANASSES FROMING



COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: TRO	E REAL GROUP Name of Birms	LLC ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
·	EMIL	Name of Person	
· .	TRUE RE	al Group LLC Trm/Combany	<u></u>
·	7771 NW 14	6th Street Address	
	Mini Lake	FTL 33016 City/State and Zip Code	2011 AE
	Inv 203 8 00 E-mail address: (1	Hook COM to be used for future annual report not	ification)
For further information co	ncerning this matter, please ca		STARY OF LAHASSEE, F
Emilio Name of	Person	at (<u>186</u>) <u>464 - 02</u> Area Code Daytim	SECRETARY OF STAIR METARY OF STAIR ME Telephone Number 10
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: 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 TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Come	nany as it now anneau	s on our records.)	
	y were filed on	06/15/	2010 and a	ssigned
Florida document number <u>LIOOO 063992</u> .				
This amendment is submitted to amend the following:				
(Name of the Limited Liability Company as it now nonears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on				
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the d	esignation "LLC"	or the abbreviation "	L.L.C."
Enter new principal offices address, if applicable:				F
(Principal office address MUST BE A STREET ADDRESS)				
			2015 J SECR TALLA	
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			35 2 55 2	
				177
		our records,		of the nev
	_		·	
Name of New Registered Agent:				•
New Registered Office Address:	Enter Floi	rida street address		
			• = -	
	City	, Flor		
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		-	

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>	Address	Type of Action
MGRM	Carmen Sandrag	17363 Sew 47th Covet MIEAMAR, FL 33029	Add
	,	MICAMAR, FL 33029	☐ Remove
			☐ Changè
MGK	Emilio So Sa	5251 SW 173 Avenue	¥2 Add
		Hiramar, 7 33029	□ Remove
			Change
MGR	Gustavo SoSa	Doral FL 30178 ASSEE, FLORIDA	Remove
			□ Add
			☐ Change
			Add
			Remove
			☐ Change

famen	ling any other information, enter (change(s) here: (Atta		ts, if necessary.)	
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	1	Jana 1°	. 2015	F73~<	24
an erreci	date, if other than the date of filing two date is listed, the date must be specific and the date inserted in this block does not	na cannot de brior to date o	filing or more than 90	(optional) days after filing.) Purnents, this date will	trant to 605.020
cumen	the date inserted in this block does not 's effective date on the Department of	State's records.		AIF	 5
	d specifies a delayed effective Oth day after the record is filed		fective time, at	12:01 a.m. on t	the earlier o
ated _	Jone 17th	, 2015 .	May		
	Signature of a	a member or authorized re	neefertuitive of a mem	per	·
		Al horto	KI SA		

Page 3 of 3

Filing Fee: \$25.00