# 110000080432

(Re	equestor's Name)	
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**EXAMINER** 

### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

# Rema Lee Professional Realty Group, 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:

	Rema Lee					
	Real World I	Name of Person Realty Gro Firm/Company				
	7721 Belmo	nte Blvd				
	Margate, FL	Address 33063				
	Rema@RemaLe	City/State and Zip C	ode		193	
For further information cor	E-mail address: (		nual report notification)		1	(
Rema Lee		<sub>at (</sub> 954	682-5769		ω U	ر مدد ع د مدد ع المديد
Name of I	Person	Area Code	Daytime Teleph	one Number 3:	у. 131 131	
Enclosed is a check for the	following amount:					
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing F Certified Cop (additional copy	у	S60.00 Filin Certificate Certified C (additional co	of Statu opy	

#### 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

## Rema Lee Professional Realty Group, 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 L	iability Company wer	e filed on August 2n	nd, 2010	and ass	igned
Florida document number L10000080432	<del></del> ,				
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name o	f the limited liability	company here:			
Real World Realty Group LLC					
The new name must be distinguishable and end with the	words "Limited Liability	Company," the designation	"LLC" or the ab	breviation "I	L.C."
Enter new principal offices address, if applic	eable:				
(Principal office address MUST BE A STREE	TADDRESS)				
·				200	
Enter new mailing address, if applicable:			-	-\$1.5 -\$1.5	"ግ ሄ ች
,			ve v	<u>: ت</u>	, 4750 mil
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		•••••	ن	
	_				<u>. u                                   </u>
					ال المساء
B. If amending the registered agent and/ registered agent and/or the new registered of	_	e address on our rec	ords, <u>enter t</u>	L.U	of the new
registered agent and/or the new registered of	ince address here.		۱ ادم احمار	· o	
Name of New Registered Agent:	Real Dream In	vestment Group L	LC		<del>.</del>
New Registered Office Address:	3255 NW 94th	Avenue, # 9487			
		Enter Florida street ac	ddress	-	
	Coral Springs,		, Florida 330	075	
	<del> </del>	City	., 1 lollan	Zip Code	
New Registered Agent's Signature, if changing l	Registered Agent:				
			* 6 *		

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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		•	□ Remove

·	dditional sheets, if necessary.)
the date this document is filed by the Florida Department of State)	annot be more than 90 days after
the date this document is filed by the Florida Department of State)	(optional) annot be more than 90 days after
the date this document is filed by the Florida Department of State)  Dated March 4th , 2014	e e
Dated March 4th , 2014  Signature of a perimer or authorized representation of State)	e e
Dated March 4th , 2014 Rence Pl	ntative of a member

Page 3 of 3

Filing Fee: \$25.00



February 26, 2014

REMA LEE 7721 BELMONTE BLVD. MARGATE, FL 33063

SUBJECT: REMA LEE PROFESSIONAL REALTY GROUP, LLC

Ref. Number: L10000080432

We have received your document for REMA LEE PROFESSIONAL REALTY GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 014A00004341