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SECRETARY OF STATE

T. CLINE
MAY 18 2011
EXAMINER

COVER LETTER

Division of Co				
SUBJECT:	URBAN	BROKERS, LLC		
		ited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following:		
	E	ETINA S. WEILERAS		
	Name of Person	•		
	S	PAZIO REALTY, LLC		
	Firm/Company			
		Address		
	SUNN'	Y ISLES BEACH, FL 33160		
		City/State and Zip Code		
	betir	taweileras@hotmail.com to be used for future annual report notification)	₩. ~	
For further information	concerning this matter, please of		2011 MAY 17 SECRETARY ALLAHASSE	
BETIN	IA S. WEILERAS	at (_786) 271 - 1278	MAY 17 RETARY	
Name	of Person	Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount:		TATE DRIDA	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ing Fee, ate of Status &	
	ING ADDRESS:	STREET/COURIER ADDRESS: Registration Section		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	IRBAN BRO	KERS, LLC			
(Name of the Limited	Florida Limited I	ny as it now appears of Liability Company)	<u>n our records.</u>)		
The Articles of Organization for this Limited L	iability Company	were filed on	09/03/2010	and assigned	
Florida document numberL10000093					
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name o	f the limited liab	oility company here;			
	SPAZIO REA	ALTY, LLC			
The new name must be distinguishable and end win "L.L.C."	h the words "Limi	ited Liability Company,	" the designation "I	LLC" or the abbrevia	tio
Enter new principal offices address, if applicable:		17070 COLLINS	SAVENUE		_
(Principal office address MUST BE A STREET ADDRESS)		SUITE #265			_
		SUNNY ISLES	BEACH, FL 33	1 <u>6ම් ග</u> පු	_
				II HAY	-
Enter new mailing address, if applicable:		17070 COLLINS	AVENUE	HE A	<u></u>
(Mailing address MAY BE A POST OFFICE BOX)		SUITE #265		III RY SSE	#F1019
		SUNNY ISLES	BEACH, FL 33	160	Ī
B. If amending the registered agent and/o	or registered of	Tice address on our	rocords antar t	37 A 37	***
registered agent and/or the new registered of			records, enter t	D O the h	<u>iev</u>
Name of New Registered Agent:	BETINA S.	WEILERAS			_
New Registered Office Address:	17070 COL	LINS AVENUE #2	65		
		Enter	Florida street add	ress	_
	SUNNY	/ ISLES BEACH	, Florida	33160	
		City		Zip Code	-
New Registered Agent's Signature, if changing F	legistered 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 Changing Registered Agent Signature of New Registered Agent

Page 1 of 2

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:

MGP = Ma	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			AddRemove
			Add Remove
D. If a man	ding any other information automakes		ASSET ARY IN ARY
— —	unig any other unormation, enter chang	ge(s) here: (Attach additional sheets, if necessa	YOF TAIR
Dated	MAY 11	011	
	, U BET	r or authorized representative of a member INA S. WEILERAS I or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00