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B. BOSTICK

JUN - 9 2011

EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: FL. Elite Dealty ILLC. 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:		
Marilyn Herrandez Name of Person FL. Elite Realty, LLC. Firm/Company 550 11th Street, Suite 113 Address Miami Beach, FL 33139 City/State and Zip Code Marilyn & FLedite Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	11 JUN -8 AM 9: 21	n
Mailua Hermades 305-538-614n		
Manic of Person Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$30.00 Filing Fee \$Certificate of Status \$Certificate of Status \$Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

TO:

Registration Section

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

FL. Elite Real	Ity, LLC.	
(Name of the Limited Liability Com (A Florida Limited	pany as it now appears on a Liability Company)	our records.)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L10009635</u> b <u>L100009635</u> This amendment is submitted to amend the following:		mber 15,2010 and assigned
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and end with the words "Li"L.L.C."	imited Liability Company," (he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		7 SE 1
(Principal office address MUST BE A STREET ADDRESS)		
		(n) reasons
	•	eier o
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		9. 2 8. 2
		<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		, Florida
	City	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 Changing Registered Agent, Signature of New Registered Agent

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 **Type of Action** MGRM Heyd: Cantillano 4744 SW 4th Street Miami, FL. 33134

MGRM Elizabeth M. Berger 1955 North University Coral Springs, FL. 330 <u>Title</u> **Name Address ∑**∕Remove ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 6-6-11 Signature of a member or authorized epresentative of a member

Page 2 of 2

Filing Fee: \$25.00