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FILED SECRETARY OF TALLAHASSEE
FLORIDA

COVER LETTER
• COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: <u>Adrian Realty LLC</u> 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:
OLGA ADM'AN
Name of Person
Firm/Company
1332 SW 122 Court Address
MiAMI FL 33175 City/State and Zip Code Palonso @ adrianhomes.com Hmail address: (to be used for future annual report notification)
City/State and Zip Code
H-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PAtty Alonso at (305) 225-1515 Name of Person Area Code & Daytime Telephone Number
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

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□\$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

	FILED
ARTICLES OF AMENDMENT	2013 MAY 20 PN 3 20
TO ARTICLES OF ORGANIZATION OF	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ADM'AN Realty LLC (Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company were filed on <u>Fee</u> Florida document number $L/10000/5659$.	2, 2, 3011 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and end with the words "Limited Liability Company." ("L.L.C."	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	······
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our r registered agent and/or the new registered office address here:	ecords, <u>enter the name of the new</u>
Name of New Registered Agent:	
New Registered Office Address:	lorida street address
Lmer r	
City	, Florida 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

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MGR LAURA VASQUEZ 13687 SW 26 Street X Ad MiAMi, FL 33175 Ren	
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated MAY 15 2013 Dated MAY 15 2013 Signature of a member or authorized representative of a member PEDNO J. ADM'AN Typed or printed name of signee

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Filing Fee: \$25.00

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