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# Florida Department of State

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## **FAX COVER SHEET**

то		
COMPANY		
FAX NUMBER	18506176383	
FROM	Ani Muradian	
DATE	7/21/2011 3:24:27 PM PDT	
RE	Decorus Realty LLC 501075617	

#### COVER MESSAGE

Ani Muradian | Business Special Filing Specialist
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### **COVER LETTER**

Division of Co				
SUBJECT: DECOR	RUS REALTY LLC		<u></u>	
	(Name of Lin	nited Liability Company)		
	f Amendment and fee(s) are su	•		
Please return all corresp	condence concerning this matte	r to the following:	OII J	<del></del> -
	Barbara Dang	v		-
		(Name of Person)	JUL 22 CAHASSEE	
	Legalzoom.com, Inc			11
		(Firm/Company)	STATE LORID	C
	100 W. Broadway S	uite 100		
		(Address)		
	Glendale, CA 91210	)		
		(City/State and Zip Code)		
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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

DECORUS REALTY LLC		<b>圣</b> 紹 皇
(Name of the Limited L	iability Company as it now appears on our record lorida Limited Liability Company)	
		ASSE assigned
The Articles of Organization for this Limited Lial	bility Company were filed on <u>05/06/2011</u>	vano assigned
Florida document number <u>L11000053940</u>	·	
		25 <b>%</b> C
This amendment is submitted to amend the follow	wing:	OS RRIDA
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and end with "L.L.C."  B. If amending the registered agent and/or registered agent and/or the new registered officers.	the words "Limited Liability Company," the designar registered office address on our records, eace address here:	
Name of New Registered Agent:		
New Registered Office Address:		
•	(Enter Florida street address)	
	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re  I hereby accept the appointment as registered the provisions of all statutes relative to the pro accept the obligations of my position as registe being filed to merely reflect a change in the re company has been notified in writing of this ch	agent and agree to act in this capacity. I furth oper and complete performance of my duties, a ered agent as provided for in Chapter 608, F.S gistered office address, I hereby confirm that t	and I am familiar with and S. Or, if this document is the limited liability
	(if Changing Registered Agent, Signature of	New Resident Artill

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:

	Manager = Managing Member		
Title	<u>Name</u>	Address	Type of Action
MGRM	Abraham Seno Bril	16850 Collins Ave. Suite 105 Sunny Isles Beach, FL, 33160	Add Remove
<u>MGRM</u>	David Koster	16850 Collins Ave, Suite 105 Sunny Isles Beach, FL, 33160 MGRM	✓ Add Remove
MGRM	David Koster	20505 E COUNTRY CLUB DR. SUITE 9: AVENTURA EL 33180 US	35 Add ✓ Remove
			Add Remove
			Add Remove
			ARADA JULIAN ZONA ZONA ZONA ZONA ZONA ZONA ZONA ZO
D. Ifam		nange(s) here: (Attach additional sheets, if necessa	3 In
	Article II - The street address of the pri	incipal office of the Limited Liability Company shanny Isles Beach, FL, 33160	90 0
	The mailing address of the Limite	d Liability Company shall be:	and the same of th
	16850 Collins Ave, Suite 105, Su	nny Isles Beach, FL, 33160	
Dated	als	011	
	David Koster	mber or authorized representative of a member	
	T <sub>3</sub>	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00