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ORIDA

D. SCOTT NOV 1 8 2016

COVER LETTER

TO:	Registration Se Division of Cor		¥	·	
SUBJE		L REALTY REFERRAL, LLC			
SUBJE		Name of Limi	ited Liability Company	<u> </u>	
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		ELEANOR ELIZABETH	GLOVER		
			Name of Person		
		NATIONAL REALTY RE	FERRAL, LLC		
			Firm/Company		
	1331 S HARBOR CITY BLVD				
			Address		
		MELBOURNE, FL 32901			SECR TALL
		4	City/State and Zip Code		聖皇二
		beth@bethglover.com			SSE IM
		E-mail address: (1	to be used for future annual report notifi	ication)	
For fur	ther information c	oncerning this matter, please ca	dl:		FILED 2:51
Eleano	r E Glover		321 726-0800 at ()	,	A STATE OF
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclose	ed is a check for th	ne following amount:			
\$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filin Certificate Certified Co (additional co	of Status &

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

NATIONAL REALTY REFERRAL, LLC		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our record nited Liability Company)	<u>s.</u>)
he Articles of Organization for this Limited Liability Comp	pany were filed on 05/16/2011	and assigned
lorida document number L11000058553		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	<u> </u>	
		IG SE(
nter new mailing address, if applicable:		至
Mailing address MAY BE A POST OFFICE BOX)		335 - F
		mo m
•		ES.
3. If amending the registered agent and/or registere	ed office address on our records	s, enter the name of the
egistered agent and/or the new registered office address	<u>s here</u> :	DAI -
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	s
	, Flo	orida
	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 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ELEANOR ELIZABETH GLOVE	1331 S HARBOR CITY BLVD., M	= Add
		FRANCK KAISER, JR	■ Remove
			□ Change
When	Hanch Kaiser JV		Add
J			■ Remove
			☐ Change
			□ Add
			□ Remove
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Frativa data if	other than the date	o of filings			inntinual)	
an effective date is lote: If the date i	listed, the date must be s	pecific and cannot be loes not meet the a	pplicable statutor	ng or more than 90 days	optional) s after filing.) Pursuant to 6 s, this date will not be li)5.020 sted a
	fies a delayed eff after the record		it not an effec	tive time, at 12:	01 a.m. on the ear	lier d
ated	11/14 Mann E. Sign		<u>6</u> .			
	- ,	<i>~</i> .	,			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00