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WILL ANASSES FLORIDA

WAR 28 Ann J. HARRIS

COVER LETTER

5:

TO: Registration Section Division of Corporation			
SUBJECT: Stra	tegic Real E	State Investored Liability Company	-s LLC
The enclosed Articles of An	nendment and fee(s) are subm	itted for filing.	
Please return all corresponde	ence concerning this matter to	the following:	
	Vince N	lariano	
		Name of Person	
		Pal Estate Inve	istors LLC
		Firm/Company	
	10159 Mm	berland Place Address	
	Boca Rat	On FL 3342. City/State and Zip Code 159 E com Cast, n be used for future annual report notion	\$
		City/State and Zip Code	,
	VMALIO	159 Ecomcastin	e t
	E-mail address: (to	be used for future annual report notif	fication)
For further information cond	erning this matter, please call	:	
Vince Man	riano	at (56) 866 Area Code Daytime	-0136
Name of Pe	rson	Area Code Daytime	e Telephone Number
Enclosed is a check for the f	ollowing amount:		
\$25.00 Filing Fee	□ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Strategic Rea	1 Estate Investors LLC
(Name of the Limited Lia (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabilit	ty Company were filed on and assigned
This amendment is submitted to amend the following	g:
	consulting L.L.C. "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET AD	
Tracqua vijece unuress MOST DE A STREET AL	/DRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter the name of the new
registered agent and/or the new registered office a	address nere:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Graham P. Wellington	1641 NW 10th Street	🗆 Add
		1641 NW 10th Street Boca Raton, FL 33486	Remove
		· · · · · · · · · · · · · · · · · · ·	Change
			Add
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			Sto Change
	-		# C
			Remove
			Change

Fective date, if other than the date of filing: (optional) In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 days. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a cument's effective date on the Department of State's records. Teccord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filled. The 90th day after the record is filled.						
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Filing Fee: \$25.00