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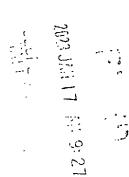
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01/17/23--01039--009 **25.00



COVER LETTER

TO:

Registration Section Division of Corporations

ARHUS RE	EAL ESTATE, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	John Polit			
		Name of Person		
	ARHUS REAL ESTATE.	LLC		
		Firm/Company		
	175 SW 7TH ST #2416			
		. Address		
	MIAMI, FL 33130			2 8
		City/State and Zip Code	_	
	john@thebuildco.com			-
	E-mail address: (to be used for future annual report no	tification)	-
For further information c	oncerning this matter, please c	all:		
Omar Ortega		305 461-5454 at ()		•
Name o	f Person	Area Code Dayti	me Telephone Number	_ _
Enclosed is a check for the	na following amount			
	-	Figure on the co	F. 6(0.00 FW	-
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &
Mailing Addres		Canada Addinan		
Registration S		<u>Street Address:</u> Registration S	ection	
Division of C		Division of Co		
P.O. Box 632 Tallahassee, 1		The Centre of	Tallahassee oe Street, Suite 81	0
rananassee, i	1 12 32 3 14	Tallahassee, F		U

u]

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARHUS REAL ESTATE, LLC			
(Name of the Lim	ited Liability Company as it now as (A Florida Limited Liability Comp	ppears on our records.) any)	
The Articles of Organization for this Limited I Florida document number $\frac{1.11000082959}{1.000082959}$		n 07/19/2011	_ and assigned
This amendment is submitted to amend the fol			
A. If amending name, enter the new name	of the limited liability compar	<u>ıv here</u> :	
The new name must be distinguishable and contain the Enter new principal offices address, if appli		the designation "LLC" or the abbrev	
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			2
Mailing address MAY BE A POST OFFICE	<u> </u>		
B. If amending the registered agent and/or	registered office address on a	our records enter the name of	f the new registers
agent and/or the new registered affice addr		ur records, enter the name o	t the new registere
Name of New Registered Agent:	DORTA & ORTEGA, P.A.		. <u>.</u> 0
New Registered Office Address:	3860 SW 8th Street, PH	r Florida street address	
	Coral Gables	. Florida ³³¹³⁴	

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.

City

If Changing Registered Agent/Signature of New Registered Agent

Zip Code

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	Jose Luis Ycaza	PO BOX 450447 Miami, FL 33245	🗆 Add
			Remove
			□Change
MGR	Ecco Property Management, LLC	2050 Coral Way, Suite 511 Miami, Florida 33145	= Add
			□Remove
			□Change
			□Add
			Remove ☐ Change
			□Remove
			□Change
			□Add
			🗆 Remove
			□Change
			□Add
			□Remove
			□Change

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	2073 J.H
	7073 J.H
	7073 J.H
	707.4 J.H
	707.0 J.E.
	47.7
	2
ffective date, if other than the date of filing:	rsuant to 605.020 I not be listed a
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90 listified,)th day after th
ated January 10 , 2023 .	
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Filing Fee: \$25.00