

L11000084782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

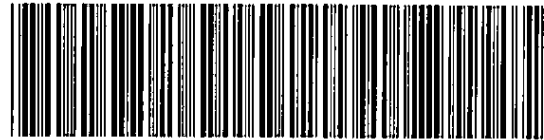
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600330904516

06/24/19--01034--023 **25.00

FILED
2019 JUN 24 AM 11:49
SEP 24 10 10 AM '19
TALLAHASSEE, FL 32301

Y SULKER

JUL 08 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

HORUS USA LLC

SUBJECT: _____
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:

AMBAR ABEIJON

Name of Person

CASA GROUP REALTY INC

Firm/Company

18427 NE 28th Ave

Address

Aventura, FL 33160

City/State and Zip Code

ambarabeijon@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ambar Abeijon

786

344-4465

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following 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**

HORUS USA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on ~~07/20/2011~~ 7/23/11 and assigned Florida document number L11000084782

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

18427 NE 28th Ave

(Principal office address MUST BE A STREET ADDRESS)

Aventura, FL, 33160

Enter new mailing address, if applicable:

18427 NE 28th Ave

(Mailing address MAY BE A POST OFFICE BOX)

Aventura, FL, 33160

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

CASA GROUP REALTY INC

New Registered Office Address:

18427 NE 28th Ave

Enter Florida street address

AVENTURA

Florida

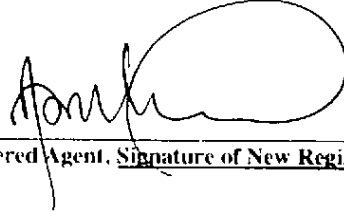
33160

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>	<u>Address</u>	<u>Type of Action</u>
MGR	ROYAL MERIDIAN GROUP LLC	4770 BISCAYNE BLVD STE 1280 - MIAMI, FL, 33137	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CASA GROUP REALTY INC	18427 NE 28th Ave AVENTURA, FL, 33160	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

RECEIVED
29 JUN 2014
11:16 AM
FILED


2015 JUN 21 AM 11:49
SUN 6/21/15
4071602470000

FILED
2019 JUN 21 AM 11:49
CLERK OF DISTRICT COURT
JULIA A. BROWN

(If an 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 605.0207 (3)(b)

(b) The 90th day after the record is filed.

Dated April 30 2019


Signature of a member or authorized representative of a member

AMBAR ABELON

Typed or printed name of signee