## L11000087124

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**Registration Section** 

TO:

## **COVER LETTER**

Division of Co	rporations			
SUBJECT:	SSS REAL E	STATE GROUP LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following;		
	ST	EVEN STANIMIROVIC		
		Name of Person		
	SSS R	EAL ESTATE GROUP LLC	<del></del>	
		Firm/Company		
	90 PARK DRIVE, SUITE # 1			
		Address	بن <u>حمر</u> الله الله الله الله الله الله الله الله	
	ВА	L HARBOUR, FL 33154		11 NOV 21
		City/State and Zip Code	557 557	
	leor	nardolainez@yahoo.com (to be used for future annual report notificati	<u>on)</u> -r <sub>3</sub>	
For further information	concerning this matter, please	-	LORID	PH 3:
Leo	onardo Lainez	at ( 305 ) 22	⇒ 3-2670	
	of Person	Area Code & Daytime Te	lephone 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	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle	

12.

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## SSS REAL ESTATE GROUP 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 \_\_\_\_\_JULY 29, 2011 and assigned Florida document number \_\_\_\_ L11000087124 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 end with the words "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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the mame of the new registered agent and/or the new registered office address here: STEVEN STANIMIROVIC Name of New Registered Agent: 90 PARK DRIVE # 1 New Registered Office Address: Enter Florida street address BAL HARBOUR , Florida FLORIDA 33154 City

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 608, 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

12.

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:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action				
MGRM	STEVEN STANIMIROVIC	90 PARK DRIVE # 1 BAL HARBOUR, FLORIDA 33154	Add Remove				
PRESIC	STEVEN STANIMIROVIC	90 PARK DRIVE # 1 BAL HARBOUR, FLORIDA 33154	Add ✓ Remove				
			Add Remove				
			Add Remove				
			Add Remove				
			Add Remove				
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)					
  Dated	NOVEMBER 17 2	011 .	11 NOV 21 PN 3: 41 SEARCH STATE TALLAHASSEE, FLORIDA				
	Heven	Hanimino vice er or authorized representative of a member	A				
	•	VEN STANIMIROVIC					
	Typed or printed name of signee						

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Filing Fee: \$25.00