

L11000113318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

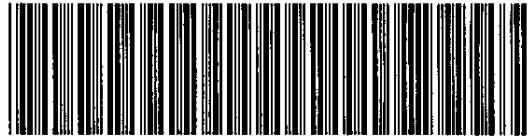
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

AUG 26 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **REAL ESTATE EXPERTS, LLC**

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:

Roberto Wolff

Name of Person

Real Estate Experts LLC

Firm/Company

2555 Collins Ave # 2408

Address

Miami Beach, FL 33140

City/State and Zip Code

rwolff@firenzegroup.com

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

For further information concerning this matter, please call:

Roberto Wolff

Name of Person

at **305 505-1585**

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

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Real Estate Experts, LLC

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MGR = Manager
AMBR = Authorized Member

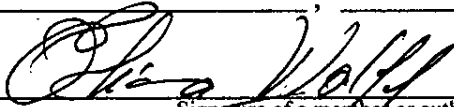
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated August 1st, 2014



Signature of a member or authorized representative of a member

Eliana R. Wolff , MGRM

Typed or printed name of signee

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Filing Fee: \$25.00

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