

L11000115445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

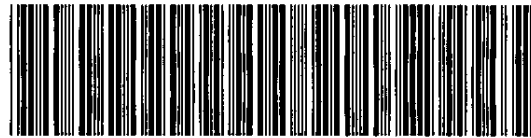
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600258163766

03/26/14--01015--019 **25.00

FILED
14 MAR 26 PM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1 March APR 1 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Level Realty Group, 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:

Richard Kasser

Name of Person

Firm/Company

102 NE 2nd Street, #153

Address

Boca Raton, FL 33432

City/State and Zip Code

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

For further information concerning this matter, please call:

Richard Kasser

Name of Person

at (

561 948-0112

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Level Realty 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 10/2/11 and assigned
Florida document number L11000115445.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Ocean Rock Realty, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "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)

FILED
14 MAR 26 PM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
<u>MGR</u>	<u>Adam Freedman Enterprises, LLC</u>	<u>730 SW 4th St.</u>	<input checked="" type="checkbox"/> Add
		<u>Boca Raton, FL 33486</u>	<input type="checkbox"/> Remove
<u>MGR</u>	<u>J. Gilda Enterprises, LLC</u>	<u>102 NE 2nd St. #203</u>	<input checked="" type="checkbox"/> Add
		<u>Boca Raton, FL 33432</u>	<input type="checkbox"/> Remove
<u>MGR</u>	<u>Inova JKM, LLC</u>	<u>102 NE 2nd St. #203</u>	<input checked="" type="checkbox"/> Add
		<u>Boca Raton, FL 33432</u>	<input type="checkbox"/> Remove
<u>MGR</u>	<u>Rich Kasser Enterprises, LLC</u>	<u>102 NE 2nd St. #153</u>	<input checked="" type="checkbox"/> Add
		<u>Boca Raton, FL 33432</u>	<input type="checkbox"/> Remove
<u>MGR</u>	<u>Richard Kasser</u>	<u>102 NE 2nd St. #153</u>	<input type="checkbox"/> Add
		<u>Boca Raton, FL 33432</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

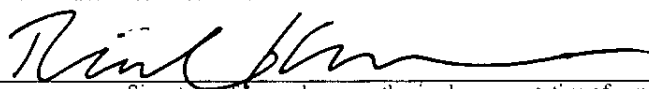
FILED
14 MAR 26 PM 4:29
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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: 4/1/14 (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 March 12, 2014



Signature of a member or authorized representative of a member

RICHARD KASSER

Typed or printed name of signer

FILED
14 MAR 26 PM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA