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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
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Certified Copies	_ Certificates of	Status
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SECRETARY OF STATE
TALLAHASSEE FLORID.

## **COVER LETTER**

TO: Registration So Division of Cor		,	•		
	RE INVESTMENTS, LLC				
SUBJECT:	Name of Lim	ited Liability Company		-	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing			
Please return all correspo	ondence concerning this matter	to the following:			
	MARK ROBERTO				
		Name of Person		<del></del>	
	•	Firm:Company		_	
	356 MOORINGS DR				
		Address		سب کے بروھے ک	
	LANTANA, FL 33462			ALLY SELY	
	MARK@SYCINVESTME	City/State and Zip Code NTS.COM		JUN 18	
	E-mail address: (	to be used for future annual report noti-	tication)	် ကြိုင္ ဘာရီး နွဲ	
For further information c	concerning this matter, please c	all:		LONG LONG	ij.
MARK ROBERTO		954 393 4188 at ()		A Del	3
Name (	of Person	Area Code Daytim	e Telephone Numh	ner	
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific Certific	Filing Fee, cate of Status & ed Copy nal copy is enclosed)	
Regist Divisio	ANG ADDRESS: ration Section on of Corporations	STREET/COURI Registration Section Division of Corpor	on .	:	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

any as it now appears on our records. Liability Company)	)
were filed on <u>2/17/12</u>	and assigned
pility company here:	
lity Company," the designation "LLC"	or the abbreviation "L.L.C."
523 N. DIXIE HWY.	
LAKE WORTH, FL 33460 \$	70 6
ffice address on our records,	ASSEE FLORDA 8: 12 enter the name of the
Enter Florida Street address	
, Flor	rida Zip Code
	mility company here:  Tity Company," the designation "LLC"  523 N. DIXIE HWY.  LAKE WORTH, FL 33460 \$   Enter Florida street address  Florida street address  Florida street address

## 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>	Name	Address	Type of Action
			☐ Remove
			Change
			☐ Remove
			Change
		***	
			<b>Example</b> Comove
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			EE, FLORING CO.
			Change
			Add
			□ Remove
			☐ Change
			Add
			☐ Remove
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ffective date, if other than the an effective date is listed, the date multiple. If the date inserted in this bocument's effective date on the L	lock does not meet the applicable sta	(optional) of tiling or more than 90 days after filing.) Pursua tutory filing requirements, this date will no	ant to 605,020 of be listed a
e record specifies a delaye The 90th day after the re	d effective date, but not an ecord is filed.	ffective time, at 12:01 a.m. on th	e earlier o
JUNE 13 Dated	2018		
· ········	Mark Roberto		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00