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SECRETARY OF STATE
TALLANASSEE, FI OBJEA

J. SAULSBERRY EXAMINER

DCT 3 1 2012

COVER LETTER

TO:

TO:	Registration Section Division of Corp.							
SUBJE	ECT:	TWENTY S	EVEN GRO	OUP LLC				
SCBCE:			ited Liability Co	mpany				
The en	closed Articles of A	mendment and fee(s) are sul	bmitted for filing	7 .				
Please	return all correspond	dence concerning this matter	r to the following	g:				
		E	BIANCA SAF	PORITTO				
			Name of P	erson		_		
		TEAM REAI	L ESTATE M	IANAGEMEI	NT, LLC	,		
			Firm/Com			_		
		2801 NE 208	TH TERRAC	CE, SECONE	FLOOR			
			Addres	S		TAL		
		Δ	VENTURA,	FL 33180		347 2002	7067	,
			City/State and				30	,
			TEAMREMA			_		; }-
For fur	ther information cor	E-mail address: (ncerning this matter, please of	to be used for futucall:	re annual report n	otification)	FSTATI	#H ID: 30	,
	DIANO	CADODITTO	0.0	\ -	454.0045	Ď.	5	
	Name of I	A SAPORITTO Person	at (30) Area Code & Day	454-0915 time Telephone Numb	ber		
				•	•			
Enclose	ed is a check for the	following amount:						
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Fil Certified (addition		Certifi sed) Certifi	Filing Fee, cate of Sta led Copy onal copy		osed)
	Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations : 6327 see, FL 32314		STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations g Center Circle	:		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ENTY SEVEN GROUP L				
(Name of the Elimite	d Liability Company as it now appea A Florida Limited Liability Company)	its on our records.			
The Articles of Organization for this Limited 1	Liability Company were filed on	03/20/2012	and assigned		
Florida document number L1200003	88786				
This amendment is submitted to amend the following	llowing:				
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :			
The new name must be distinguishable and end w "L.L.C."	rith the words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation		
Enter new principal offices address, if appli	cable:	Ţ	2 S		
(Principal office address MUST BE A STRE	ET ADDRESS)		7 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
			B 1		
Enter new mailing address, if applicable:		17. 17. 17.	7		
(Mailing address MAY BE A POST OFFICE BOX)		980	0. 30		
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter t</u>	he name of the ne		
Name of New Registered Agent:					
New Registered Office Address:	2801 NE 208TH TERRAC	E, #200			
	E_{i}	nter Florida street addi	ress		
	AVENTURA	, Florida	33180		
	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 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 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 **Title Name** <u>Address</u> **Type of Action** MGR TEAM REAL ESTATE 2801 NE 208TH TERRACE ☐ Add Navada Mergi Inc SECOND FLOOR ∇ Remove AVENTURA, FL 33180 ☐ Add ☐ Add Remove Remove □Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) OCTOBER 23 2012 Signature of a member or authorized representative of a member **BIANCA SAPORITTO**

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00