L12000043655

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COVER LETTER

TO:	Registration Sec Division of Corp		4	The second of th	,
SUBJE	CT∙	OLTO	O-OTIO LLC	,	
ОСБО			ted Liability Company		
		Amendment and fee(s) are sub	_		
		E	BIANCA SAPORITTO)	
			Name of Person		
TEAM REAL			ESTATE MANAGE	MENT, LLC	
			Firm/Company		
2801 NE 208TH TERRACE, SECOND FLOOR					
			Address		
		A	VENTURA, FL 33180)	
			City/State and Zip Code		
		E-mail address: (t	EAMREMANAGEME o be used for future annual rep	ent notification)	
For furt	her information co	ncerning this matter, please c	all:		
		A SAPORITTO	at (305)	914-4845	
	Name of	Person	Area Code &	Daytime Telephone Number	
Enclose	d is a check for the	e following amount:			
√ \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	nclosed) Certified (of Status &
MAILING ADDRESS: Registration Section Division of Compositions		STREET/O			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	LTO-OTIO LLC				
(<u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appea	rs on our records.)	_ 		
(A Piona	a Emilied Elability Company)				
The Articles of Organization for this Limited Liability	Company were filed on	03/29/2012	nild assigned		
Florida document numberL12000043655	.		H GG		
			7 953		
701			N 826		
This amendment is submitted to amend the following:		# ## ## ## ## ## ## ## ## ## ## ## ## #			
A. If amending name, enter the new name of the lin	nited liability company her	·e·	5 33		
		<u></u> .			
	TLO-OTIO LLC		<u>~ ~</u>		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compa	any," the designation "L	LC" or the abbreviation		
L.L.C.					
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADD	APECCI				
(2) Incipat office data ess most be A STREET ADD	<u> </u>				
Enter new mailing address, if applicable:		•			
• • • •	 				
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or regi		our records, <u>enter t</u> l	he name of the new		
registered agent and/or the new registered office ad	<u>dress here</u> :				
Name of New Registered Agent:					
	····				
New Registered Office Address:		<u>-</u>			
	Enter Florida street address , Florida				
	City	, riorida	Zip Code		
	~,		P COMO		

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

Page 1 of 2

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> Type of Action <u>Name</u> **Address** ☐ Add Remove ☐ Add Remove ☐ Add Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ONLY CHANGING THE SPELLING OF THE NAME LLC MARCH 29 2012 Dated_ Signature of a member or authorized representative of a member **BIANCA SAPORITTO** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00