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(Requestor's Name)					
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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G. MCLEOD"

SEP 1 1 2012

EXAMINER



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SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

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то:	Registration S Division of Co				
SUBJI	ECT:	HOME REGIA	REAL ESTATE LLC		
5000			ted Liability Company	 	
The en	closed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
		LORENZO AZPURUA			
			Name of Person		
			Firm/Company		
1200 WEST AV. #1215					
MIAMI BEACH, FLORIDA. 33139 City/State and Zip Code					
		LAZ	PURUA@YAHOO.COM to be used for future annual report no	((Cartion)	
For fu	rther information	concerning this matter, please of	·	imeatory	
		RICA SCHACHT	at (_786)	344-5769	
	Name	of Person	Area Code & Dayt	ime Telephone Number	
Enclos	sed is a check for	the following amount:			
▼ \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regist Divisi P.O. E	tration Section on of Corporations 30x 6327 nassee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	corations Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		AL ESTATE		
(Name of the Limite	d Liability Compa A Florida Limited	i <mark>ny as it now appear</mark> Liability Company)	s on our records.)	
The Articles of Organization for this Limited I	Liability Company	were filed on	3/30/2012	and assigned
Florida document numberL1200004	4816			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	oility company her	<u>e</u> :	
	REGIA REA	ALTY LLC		
The new name must be distinguishable and end w "L.L.C."	rith the words "Lim	ited Liability Compa	my," the designation	"LLC" or the abbreviation
Enter new principal offices address, if appli	cable:	N/A		
(Principal office address MUST BE A STRE	ET ADDRESS)			5. 5
				₹ ₽ \$
				HAS T
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		O C
			· · · · · · · · · · · · · · · · · · ·	FS & U
				三元 6
B. If amending the registered agent and	l/or registered o	ffice address on o	our records, <u>enter</u>	the name of the nev
registered agent and/or the new registered o	office address her	<u>re</u> :		
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A		P1 4.1	
		En	ter Florida street a	Idress
			, 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 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

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 **Type of Action** <u>Title</u> <u>Name</u> **Address** N/A ___ Add ___ Remove ☐ Add Remove Add Remove Remove _ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A SEPTEMBER 5 2012 Dated Signature of a member or authorized representative of a member LORENZO AZPURUA Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00