

4/24/2019

Division of Corporations

12 Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet 46269

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H19000134747 3)))



H190001347473ABC3

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

**From:**

Account Name : ALBER TAX ACCOUNTANT  
Account Number : I20150000098  
Phone : (305)713-9142  
Fax Number : (815)550-9948

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ACC.ALBEL@Hotmail.com

2019 APR 24 PM 12:40

APPROVED  
AND  
FILED

2019.12.27.14:23

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
REAL ESTATE 2004, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

## Electronic Filing Menu

## Corporate Filing Menu

## Help

T.G. 11/19

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REAL ESTATE 2004, 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 04/04/2012 and assigned Florida document number L12000046269.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1172 S. DIXIE HWY

# 483

CORAL GABLES, FL 33146

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1172 S. DIXIE HWY

# 483

CORAL GABLES, FL 33146

APPROVED  
AND  
FILED

**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:

1172 S. DIXIE HWY # 483

*Enter Florida street address*

CORAL GABLES

Florida 33146

*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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Starchevich Blanco, Luis E	1172 S. DIXIE HWY	<input type="checkbox"/> Add
		# 483	<input type="checkbox"/> Remove
		CORAL GABLES, FL 33146	<input checked="" type="checkbox"/> Change
AMBR	Starchevich Marcovich, Sara V	1172 S. DIXIE HWY	<input type="checkbox"/> Add
		# 483	<input type="checkbox"/> Remove
		CORAL GABLES, FL 33146	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

APPROVED  
AND  
FILED

2019 APR 24 PM 12:40

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

APPROVED  
FILED

2019 APR 24 PM 12:40

E. Effective date, if other than the date of filing: 04/24/2019 (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated APRIL 24

2019

*[Signature]*  
Signature of a member of a

**LUIS E STARCHEVICH BLANCO**

Typed or printed name of signee