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SECRETARY OF STATE
ALLAHASSEE

D. BRUCE
OCT 18 2012
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ATLAS-ROCKSfore International Realty, LLC Name of Limited Liability Company
:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Paul R. Sasso EsQuire Name of Person Law offices of Paul R. Sasso Firm/Company 7721 Sw Coa Arenve # 203 Address South Miami, Fl. 33143 City/State and Zip Code PRSIAW D MSn. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Paul R. Sasso EsQ. at 305 662-1066 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$\ \text{Certified Copy (additional copy is enclosed)} \]

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AHAS-ROCKStone International Realty 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 Con	apany were filed on	202012 and assigned
Florida document number <u>L 12000123270</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
·		
The new name must be distinguishable and end with the words	"Limited Liability Company,"	the designation "LLC" or the abbreviation
"L.L.C."		IAI S
Enter new principal offices address, if applicable:		20 LLA
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>	
	<i>:</i>	TO P E E
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		09
	·	
;		
B. If amending the registered agent and/or register	ed office address on our	records, enter the name of the new
registered agent and/or the new registered office addres	<u>is here</u> :	
; ;		
Name of New Registered Agent:		
New Registered Office Address:	· .	· .
	Enter Florida street address	
•		
	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 <u>Address</u> Type of Action <u>Title</u> <u>Name</u> Add 🗌 Remove ☐ Add ☐ Remove Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Peralta as Director for lister a

Page 2 of 2

Filing Fee: \$25.00

Signature of a member or authorized representative of a member