L12000138056

| (Requestor's Name) |
|---|
| |
| (Address) |
| , |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| Certified doples Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| _ |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



500417432335

10/16/23--01021--009 **25.00

023 OCT 16 PM 3: 18

A. PARISHANI OCT 2 2 2023

COVER LETTER

Division of Corporations NEW STANDARD REALTY & INVESTMENT GROUP LLC SUBJECT: 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: Carlos M Amor Name of Person NEW STANDARD REALTY & INVESTMENT GROUP LLC Firm/Company 1200 S PINE ISLAND RD STE 220 Address PLANTATION, FL 33324 City/State and Zip Code carlos@emapalaw,com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carlos M Amor Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee. ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

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

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO

| ~ | |
|------------|---|
| | |
| \sim | |
| در، | • |
| \bigcirc | |
| \Box | |
| | ١ |
| _ | |
| Ġ | L |

| ARTICLES OF ORGANIZATION | 123 |
|--|--------------------------|
| OF | 173 ÛUL |
| | · |
| NEW STANDARD REALTY & INVESTMENT GROUP LLC | <u> </u> |
| (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) | |
| TO F WAREE PARTIES COMPANY | မှ |
| The Articles of Organization for this Limited Liability Company were filed on | and ussigned |
| Florida document number L12000138056 | |
| 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) | |
| | |
| | |
| | |
| Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A PQST OFFICE BOX) | |
| | |
| | |
| B. If amending the registered agent and/or registered office address on our records, enter the na agent and/or the new registered office address here: | me of the new registered |
| | |
| Name of New Registered Agent: | |
| New Registered Office Address: | |
| Enter Florida street address | |
| , Florida _ | |
| | 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> | Address | Type of Action |
|--------------|---------------------|-------------------------------|----------------------------|
| MGR | CARLOS M. AMOR P.A. | 1200 S PINE ISLAND RD STE 220 | □ Add |
| | | PLANTATION, FL 33324 | Remove |
| \ | | | □Change |
| | | | □Add |
| ` | | | Remove |
| | | | □ Change 202 1 □ Ādd |
| | | | |
| | | | ☐Remove |
| | | | ⊒: □Éhange |
| | | | <u>~</u> |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |

| | · | | - | |
|---|---|---|---------------------------------------|-------------------------------------|
| | | | | |
| | | | | 2023 |
| | | | | |
| | | | | 5 |
| | | | 771 | |
| | | | | <u></u> |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | . |
| | | | | |
| | | | | |
| | | | | |
| | | - · · · · · · · · · · · · · · · · · · · | | |
| | | | | |
| | | | | |
| | | | | - |
| Effective date if othe | er than the date of fili | ina | 10 | ptional) |
| f an effective date is listed | , the date must be specific a | and cannot be prior to date | of filing or more than 90 days: | after filing.) Pursuant to 605.0207 |
| document's effective d | ed in this block does not ate on the Department of | t meet the applicable sta f State's records. | dutory filing requirements. | this date will not be listed as |
| | | | | |
| e record specifies a dela rd is filed. | yed effective date, but n | not an effective time, at | 12:01 a.m. on the earlier of | f: (b) The 90th day after the |
| iu is nieu. | 1.1 | | _ | |
| Dated OCTOBER | 10 15 | _ · 2023 | 1 A A | |
| | | \ | /\\/~ | |
| | Signature of | a member or authorized re | presentative of a member | |

Filing Fee: \$25.00