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B. BOSTICK
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**EXAMINER** 

#### **COVER LETTER**

TO:

**Registration Section Division of Corporations** 

Intram 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:

## Randy Hodge

Name of Person

Intram Investments, Inc.

Firm/Company

5555 S. Kirkman Road, Ste. 201

Address

Orlando, FL 32819

City/State and Zip Code

rhodge@intram.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Randy Hodge

at (407) 701-9605

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

**□\$30.00** Filing Fee & Certificate of Status □\$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □\$60.00 Filing Fee, Certificate of Status & 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

Intram Realty, LLC		
( <u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on	our records.)
(A Fiorida El	mmed Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 12/3/12	2 and assigned
Florida document number L12000150793		
Plottda document number	<b>~</b> ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and end with the word "L.L.C."	ls "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
		200
		<b>E</b> C
Enter new mailing address, if applicable:		9
(Mailing address MAY BE A POST OFFICE BOX)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 13
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		5 5
B. If amending the registered agent and/or registe	ered office address on our r	No.
registered agent and/or the new registered office addre		āle.
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter F	lorida street address
		. 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 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 Title <u>Name</u> **Address** Type of Action Remove Add Remove Remove Remove Remove

• •	nter change(s) here: (Attach additional sheets, if necessary.	.)
Designate officers as	s follows:	
Rashid A. Khatib, Pr	resident	
Barry Frank, Vice Pr	resident	
Randy Hodge, Secre	etary/Treasurer	<del></del> ,
December 18		
Mully		
	of a member or authorized representative of a member	
Randall Hodge	Typed or printed name of signee	
	Page 3 of 3	

Filing Fee: \$25.00

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