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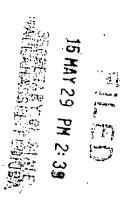
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PANAREA REAL ESTATE SERVICES LAC 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:
RATTAELE GRANDI Name of Person
PANAREA REAL ESTATE SERVICES LAC
MM LINCOLN RD 4th FLOOR
MIANU REACH / FLORIDA 33139 City/State and Zip Code
RAFFAELE 6 PANALEAUSA COT E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
RAFFAE (FLAND) at (486) 4445419 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scrifficate of Status Scriffied Copy (additional copy is enclosed) \$25.00 Filing Fee Certificate of Status Scriffied Copy (additional copy is enclosed) \$25.00 Filing Fee Certified Copy (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

EA PEAL ESTATE SERVICES, L+(
(Name of the Limited Liability Company as it now appears on our records.)

(A	Florida Limited I	Liability Company)				
The Articles of Organization for this Limited Liab Florida document number <u>し 130000 11、</u>	ility Company 368	were filed on	01/23/2	<u>2013</u> and as	signed	
This amendment is submitted to amend the follow	ing:					
A. If amending name, enter the new name of the			_			
TANAREA LEAL ESTATE The new name must be distinguishable and contain the work				the abbreviation "I	L.C."	
Enter new principal offices address, if applicab (Principal office address MUST BE A STREET A		JUI MIAM B	LÍNCOLN EACH - FI	RD 4 L -33139	The floor	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1111 J 4th lox		LD EACH-FL	-33139	
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:	R	SUBAFFACE	GRANDI	9 P	Section 2	
New Registered Office Address:	MM	LIN COLN Enter Flori	RD 4 th ida street address	thooky	4	
	MIAMI	BEACH City	, Florid	a 33 13° Zip Code	7	
Non Desistant de la contra Sient de la contra Des		5,				

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> Name **Type of Action Address** MGRI RATTABLE GRANDI ☐ Remove _□ Change GIAMPAOLO MASSIMO MGR □ Add unit 310 935 LINGOLN By Mindi BENG 33139 _□ Change GRANDI LUIGI MGL 235 Lincoln en Sitte MANIBACH XRemove Change □ □**t** Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

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Tective date, if other an effective date is listed, ote: If the date insert ocument's effective date.	, the date must be speci ed in this block does	fic and cannot be pr not meet the app	licable statutory filin	nore than 90 days after	tional) er filing.) nis date v	Porsuan will not	ည (၂၂) be liste	.0207 (3) ed as the
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Filing Fee: \$25.00