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K.SALY EXAMINER JUN 17 2013

COVER LETTER

TO:	Registration Se Division of Con			
subji	ст: <u>Com</u> i	necciAl REA	CTY PARTNE	RS LCC.
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		N;	ZAN Mosery	,
			CIAC REACTY Firm/Company	
		742 Cove	entry st.	
		Boca R	Address Aton J. City/State and Zip Code	3487
		E-mail address: (t	City/State and Zip Code 10 Soly Com Cil o be used for future shaual report no	com .
For fur	ther information o	concerning this matter, please co	all:	
	Nir AW Name o	Mo Sey	at (56/) 2/2 Area Code & Day	- 7247 time Telephone Number
Enclos	ed is a check for t	he following amount:		
□ \$25	.00 Filing Fee	№\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	☐\$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

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	DF PCalf PCalf Polity Company as if orida Limited Liability lity Company were for 1359 Ing: e limited liability company e words 'Limited Liability company e: IDDRESS)	Dealty Company as it now appears on our recorda Limited Liability Company) lity Company were filed on

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.

City

Zip Code

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>Title</u>	Name	Address	Type of Action
MGAN	NiZAN Mosery	742 COVERTIY ST. BOCA	Add
		742 COVERTIY ST. BOCA RATON St. 33487	Remove
			Add
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If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		
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	Signature of Member or authorized representative of a member	
	Typed or printed name of signee	
	Page 3 of 3 Filing Fee: \$25.00	

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