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SECRETARY OF STATE

COVER LETTER

TO: Registration Section ` Division of Corporations
SUBJECT: Empire Real Estate & Consulting, LLC
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
SUBJECT: Empire Real Estate & Consulting, 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: Danie L Schapiro Name of Person Empire Real Estate Consulting, LLC Firm/Company L339 AVALON Fointe Ct. Address BOCA RATON Florida 33 496 City/State and Zip Code Demail address: (to be used for future annual report notification) For further information concerning this matter, please call: Danie + Amir at (7tb 200-3008) Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Critificate of Status Certificate of Status Certificate Ony (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Danie L Schapiro
Name of Person
Empire Real Estate & Consulting; LLC Firm/Company
6339 AVALON Pointe ct.
Auticos
BOCA RATON Florida 33496 City/State and Zip Code
D + Amir & msw. com E-mail address: (to be used for future annual report notification)
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy
Division of Corporations Division of Corporations
,

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Empire Real Esta- (Name of the Limited Liability (A Florida)	te + Consulting	, LLC
(Name of the Limited Liability (A Florida)	Y Company as it now appears or Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability C Florida document number 430006290	Company were filed on $\frac{4/3}{2}$	0/13 and assigned
		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the worth.L.C."	rds "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	 	
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter	Florida street address
	City	, Florida Zip Code
	Cuy	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>Title</u>	Name	Address	Type of Action
MGR	Daniel TAMIR	851 NE. 182 Tenrece	Add
		N. Miami Black FL 33162	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
_			Remove

D. II	fame	hending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
•	_				
	_				
	_				
Date	d	Ma	y 17th, 20/3.		
	***************************************		lhi-		
			Signature of a member or authorized representative of a member		
			Daniel Schapiro Typed or printed name of signee		
			Typed or printed name of signee		

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Filing Fee: \$25.00

