3/30/2015 Division of Corporations

L15000079239

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : LISETTE PIE SALAZAR PA
Account Number : I20120000076
Phone : (305)361-6161
Fax Number : (305)361-6168

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: LPSALAZARLAW@AOL.COM

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GA REAL ESTATE I LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$25.00

15 MAR 30 AM 10:00
OFFICE OF SECURITIES, BANKS
AND FINANCIAL
INFORMATION SERVICES

MAR 31 2015
J. BRUCE

Electronic Filing Menu Corporate Filing Menu Help

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GA REAL ESTATE I, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/09/2013 and assigned Florida document number L13000068269.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

MARTO RANCH L.L.C.

The new name must be distinguishable and end with 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 POST OFFICE BOX)

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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:

New Registered Office Address:

Enter Florida street address

City 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

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
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			☐ Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 27th of MARCH, 2015.

ESTEBAN SAENZ
Signature of a member or authorized representative of a member

ESTEBAN SAENZ
Typed or printed name of signee

Filing Fee: $25.00

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