## L/3000133344

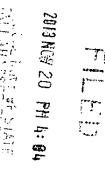
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## **COVER LETTER**

TO: Registration'S Division of Con						
SUBJECT:	Five Reality LL	C ed Liability Company				
	Nume of Billion	ca Blabins, company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspondent	ondence concerning this matter	to the following:				
	Jeff	rey S. Wachs				
		Name of Person				
	Doumar, Alls	worth, et. al.	_			
	<u> </u>	Firm/Company		<u> </u>	22	
	1177 S.E. 3r	d Avenue, _			2013 NG	*****
		Address		55 <u>-</u>	æ 20	ļ:
	Fort Lauder	dale, FL 33316		(T) (F)		ŗ
		City/State and Zip Code		ကိုပ	न्तुः	
2	jwachs@sfla			Ţ,	æ	
	E-mail address: (t	o be used for future annual report notificat	ion)	la.	_	
For further information	concerning this matter, please c	all:				
Jeffrey	S. Wachs	at ( 954 ) 762-3400				
Name	of Person	Area Code & Daytime To	elephone Number	r		
Enclosed is a check for t	the following amount:					
□ \$25.00 Filing Fee	△\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Fil Certifica	ling Fee, ite of Stat	us &	
		(additional copy is enclosed)	Certified			ed)
	ING ADDRESS:	STREET/COURIER	ADDRESS:			
	tration Section	Registration Section Division of Corporation	nns			

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Five Reality LLC					
( <u>Name of the Limited Liability (</u> (A Florida Lii	Company as it now app mited Liability Company	ears on our record ()	<u>s.</u> )		
The Articles of Organization for this Limited Liability Con	mpany were filed on _	9/20/2013		_ and ass	signed
Florida document numberL13000133344					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limite	ed liability company l	ere:			
Five Realty LLC					
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Con	npany," the designar	tion "LLC	or the	abbreviatio
Enter new principal offices address, if applicable:	<del> </del>			2003	
(Principal office address MUST BE A STREET ADDRE	<u> </u>		25 3 2- 13-	<u> 3</u>	
			;; <u>;</u> ;	2	garanna.
			ing et.		
Enter new mailing address, if applicable:			<u>""</u> ,	======================================	******
(Mailing address MAY BE A POST OFFICE BOX)			33. 53.	4D	<u>_</u>
	<del></del>				
B. If amending the registered agent and/or register	red office address or	our records, <u>er</u>	nter the	name o	of the nev
registered agent and/or the new registered office addre	ss here:			_	
Name of Many Basis and Assay					
Name of New Registered Agent:		<del></del>			
New Registered Office Address:					
	1	Enter Florida stree	et address	8	
	<i>C</i> :	, Floric		2'- 0- 2	
	City		2	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member <u>Name</u> <u>Address</u> Type of Action **Title** Remove Add Remove 711 Remove Add Remove Add Remove Remove

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_	
_	
_	
	November 15 , 2013 .
	Delan - A - Lun
	Signature of a member or authorized representative of a member
	Brian Chan-A-Sue
	Typed or printed name of signee

Filing Fee: \$25.00

2813 NO# 20 PM 4: 84

Company Compan