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COVER LETTER

	Space Coas	st Realty Group, LLC			
SUBJECT:		Name of Lin	nited Liability Company		
		Amendment and fee(s) are sub	_		
Please return	all correspo	ondence concerning this matter	to the following:		
		Maureen A. Ryan			
			Name of Person		
	Space Coast Realty Group, LLC				
		2892 Boddington Way			
		·			
		Melbourne, FL 32940			
			City/State and Zip Code		S S
		maxpc2u@yahoo.com	to be used for future annual report		REFERENCE SEP 27
			-	notification)	
For further in	iformation c	oncerning this matter, please c	all:		3 70
Maureen A.	Ryan		407- 257-535 at ()	3	
	Name o	f Person		ytime Telephone Number	
Enclosed is a	check for th	ne following amount:	-		
□ \$25.00 Fi	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &

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

Space Coast Realty Group, LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000137276</u> .	were filed on September 27, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	sility company here:	
The new name must be distinguishable and contain the words "Limited Liabi		abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2892 Boddington Way	3 50
(Principal office address MUST BE A STREET ADDRESS)	Melbourne, FL 32940	<u> </u>
		75 C
Enter new mailing address, if applicable:	2892 Boddington Way	PH 3
(Mailing address MAY BE A POST OFFICE BOX)	Melbourne, FL 32940	5
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		er the name of the new
Name of New Registered Agent:		······································
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City	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

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>	<u>Name</u>	Address	Type of Action
MGR	Elizabeth C. Montalvo	1980 N. Atlantic Ave. #411	Add
		Cocoa Beach, FL 32931	Remove
			Change
MGR	Maureen A. Ryan	2892 Boddington Way	■ Add
		Melbourne, FL 32940	□ Remove
			Change
			Add
			GREMOVAL ATTACK
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Effective date, if other than the date of if an effective date is listed, the date must be spec Note: If the date inserted in this block does document's effective date on the Departme	ific and cannot be pr s not meet the app	licable statu	filing or more than 9	(optional) 0 days after filing.) P ments, this date wi	fursuant to 605.0207 (ill not be listed as the
ne record specifies a delayed effect The 90th day after the record is		not an eff	ective time, at	12:01 a.m. or	n the earlier of:
Dated September 26	2016	 •			
Signatur	we of a member or au	ithorized epi	resentative of a mem	ber	
Maureen A. Ryan		,			

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Filing Fee: \$25.00