# L146000 (9551

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S. ESERVETS APR 0 9 2014

# **COVER LETTER**

TO: Registration Secti Division of Corpo			
SUBJECT: Re	Ality BRANG Name of Limit	ding 360, LL ited Liability Company	<u>C</u>
The enclosed Articles of Ar	nendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	Keith	Meccapiel Name of Person	li
	Reality	BRANding 3	60, LhC
	1601	BAYVIEW DR	
	Fort h Keith	AUDERDALE, City/State and Zip Code  CR R - 260. CC to be used for future annual report notifi	33305
For further information con	E-mail address: (i cerning this matter, please ca		cation)
Keith Mecco	ARIELLI	at (310) 402-	1134 Telephone Number
Enclosed is a check for the \$25,00 Filing Fee	following amount:  ☐ \$30.00 Filing Fee &  Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

### 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

Neality Beanowa (Name of the Limited Liability Compar (A Florida Limited L	1360, LLC 1y as it now appears on our records.) 1ability Company)				
The Articles of Organization for this Limited Liability Company Florida document number <u>L1400001959</u> .		4 and assig	ned		
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi	ng name, enter the new name of the limited liability company here:				
The new name must be distinguishable and end with the words "Limited Liabi	lity Company," the designation "LLC" or th	ne abbreviation "L.I	C."		
Enter new principal offices address, if applicable:	160/ BAYVIEL	UR.			
(Principal office address MUST BE A STREET ADDRESS)	FORT, LAUDER	0Ale 33305	<u>FL</u>		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		Fethe name of	f the new		
Name of New Registered Agent:		MAR 28	CONTRACTOR		
New Registered Office Address:		m <sub>c</sub> 3	*****		
	Enter Florida street address	FL	<b>[</b> ]		
	, Florida	HE WAR	J		
	City	Zin <b>Or</b> de			

## 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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

$AMBR = A\iota$	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Ric Wake	1601 Bayview Orive	Add
		FORT LAUDERDATE	Remove
		1601 Bayview Orive Fort Lauderdale Floripa, 33305	
			□ Add
			□ Remove
			La Remove
		<del></del>	<del></del>
	<del></del>		
			Remove
		A	14 MAR 28
		LOR ID	Remove.
		<b>A</b>	□ Add
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			□ Add
			Remove

		- I - Aldrid
	tn the date of filing: ic, cannot be prior to date of receipt or file to the Florida Department of State)	(optional) ad date and cannot be more than 90 days after
	1 mill	
MARCH 2	<u> </u>	_•
MARCH 2	Kith Musual Signature of a member or authori	 K

Page 3 of 3

Filing Fee: \$25.00

14 MAR 28 AM ID: 15
SECRETARY OF STATE
TALLAHASSEE, FLORID.