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To:

Division of Corporations

Fax Number

: (850) 617-6383

From:

Account Name : KOEPPEL LAW GROUP, P.A.

Account Number : 120070000064 Phone : (561)659~6455

Fax Number : (561) 659-7006

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 8250 REALTY, LLC

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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: 8250 REALTY, 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:

JOEL P. KOEPPEL, ESQ.

Name of Person

KOEPPEL LAW GROUP, P.A.

Firm/Company

400 SOUTH AUSTRALIAN AVENUE, SUITE 300

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

JOEL@KOEPPELLAWGROUP,COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOEL P. KOEPPEL, ESQ.

.., 561、659-6455

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) S60.00 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/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Apr. 30. 2014 3:54PM

KOEPPEL LAW GROUP

(((H140001036523)))

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

No. 1022 FL 3ED

2014 APR 30 AM II: 35

TALLAHASSEE. FLORIE

8250 R	EALTY, LLC	}	··· CURIN
(Name of the Limited Liability Con (A Florida Limit			<del></del> -
The Articles of Organization for this Limited Liability Comparing Florida document number <u>L1400046132</u>	my were filed on	March 19, 2014	and assigned
This amendment is submitted to amend the following:			
A. If amending name, cuter the new name of the limited li	ability company	liere:	
The new name must be distinguishable and end with the words "Limited I	iability Company," t	he designation "LLC" or the ab	breviation "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)			
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		on our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter F	lorida street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agen	_		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	te performance is provided for in	of my duties, and I am fa i Chapter 605, F.S. Or, ij	miliar with and Tthis document is
ÎÎ C	langing Registered	Agent, Signature of New Reg	stered Agent

Page 1 of 3

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Apr. 30. 2014 3:54PM KOEPPEL LAW GROUP No. 1022 P. 4 (((HI4000103652 3)))

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 <u>Title</u> Name <u>Address</u> Type of Action **Anthony Conte MGR** 400 S. Australian Ave, Suite 300 □ Add West Palm Beach, FL 33401 **■** Remove 8250 Realty, Inc. **AMBR** 400 S. Australian Ave, Suite 300 **■** Add West Palm Beach, FL 33401 ☐ Remove DAA 🗆 □ Remove □ Add

	KOEPPEL LAW GROUP formation, enter change(s) here: (Attach addi	No. 1022
with the same and the same and	or mation, enter change(s) here. (Mach that	nonai siieeis, ij necessary.)
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attective date must be speci- tate this document is filed b	ic, cannot be prior to date of receipt or filed date and canno y the Florido Department of State)	t be more than 90 days after
ed	April 30 2014	
	,	
	Significan	
	Signature of a member opauthorized representati	ye of a member
	Joel P. Koeppel	
	Typed or printed name of signee	

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Filing Fee: \$25.00