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COVER LETTER

Division of Co	rporations	·	
MIAMI R	ED BOX REALTY LLC		
SUBJECT: MIAMI RED BOX 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: ROMAN BOKERIA Name of Person MIAMI RED BOX REALTY Firm/Company 16850 COLLINS AVE STE 106 B Address SUNNY ISLES BEACH, FL 33160 City/State and Zip Code ROMANMIAMIREALTY@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ROMAN BOKERIA Name of Person Name of Person Daytime Telephone Number Enclosed is a check for the following amount:			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ROMAN BOKERIA		
		Name of Person	
	MIAMI RED BOX REAL	TY	
		Firm/Company	
	16850 COLLINS AVE ST	E 106 B	
		Address	
	SUNNY ISLES BEACH,	FL 33160	
		·	-
		·	ication)
For further information	concerning this matter, please c	all:	
ROMAN BOKERIA			
Name	of Person		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)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

MIAMI RED BOX REALTY LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears on our records. imited Liability Company))
The Articles of Organization for this Limited Liability Cor Florida document number <u>L14000070371</u>	mpany were filed on 05/01/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE	(SS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		17 JUL 24 AMILI 19
B. If amending the registered agent and/or registered agent and/or the new registered office address	red office address on our records, ss here:	enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
		, ,
	, Flor	rida 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	BEN GARCIA	16850 COLLINS AVE STE 106-B	
		Suite 103	■ Remove
		SUNNY ISLES, FL 33160	
AMBR	BEN GARCIA	16850 COLLINS AVE STE 106-B	□ Add
		SUITE 103	■ Remove
		SUNNY ISLES, FL 33160	□ Change
			☐ Remove
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ffective date,	if other than the date of fili is listed, the date must be specific a	ing:	(optional)	- 0205
Note: If the dat	te inserted in this block does not extive date on the Department of	t meet the applicable s	atutory filing requirements	this date will not be list	5.0207 (ted as t
e record spe The 90th d	ecifies a delayed effective ay after the record is filed	e date, but not an d.	effective time, at 12:	01 a.m. on the earli	er of:
07/19/20	117				
Dated					
	man		_		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00