114000073458

| (Req | uestor's Name) | |
|---------------------------|-----------------|-------------|
| | | |
| (Add | ress) | |
| (Add | ress) | |
| (City. | /State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Na | me) |
| (Document Number) | | |
| Certified Copies | Certificate | s of Status |
| Special Instructions to F | iling Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only

ö



000304846950

10/24/17--01015--030 **25.00

17 0CT 23 AH 9: 54

OCT 2.5 2017

COVER LETTER

TO:

| | Registration Sec Division of Corp | | | |
|-------------------------|--------------------------------------|---------------------------------------------------------------|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| SUBJEC | ~1+1 | CCESS REALTY LLC | | · |
| SOBJEC | -I; <u> </u> | Name of Limi | ited Liability Company | |
| The encl | osed Articles of a | Amendment and fee(s) are sub- | mitted for filing. | |
| Please re | etum all correspo | ndence concerning this matter | to the following: | |
| | | ANASTASIJA BLANK | | |
| | | | Name of Person | |
| | | GOLD SUCCESS REALT | Y LLC | |
| | Firm/Company | | | |
| | | 14771 INDIGO LAKES C | IR | |
| | | | Address | |
| | | NAPLES, FL 34119 | | |
| City/State and Zip Code | | | · | |
| | | kutsko@satimecpa.com | to be used for future annual report notifi | cation) |
| For furth | ner information co | oncerning this matter, please ca | | |
| ANAST | 'ASIJA BLANK | | 347 495-4874 at () | |
| | Name of | Person | at () Area Code Daytime | Telephone Number |
| Enclosed | l is a check for th | e following amount: | | |
| \$25. | 00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Registr Divisio | ING ADDRESS: ation Section n of Corporations ox 6327 | STREET/COURIF Registration Section Division of Corpora Clifton Building | ı |

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | OLD SUCCESS REALTY LLC | |
|-------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------------|
| (Name of the Limit | ed Liability Company as it now appears on our reco (A Florida Limited Liability Company) | rds.) |
| The Articles of Organization for this Limited Li | ability Company were filed on 05/06/2014 | and assigned |
| Florida document number L14000073458 | · | |
| This amendment is submitted to amend the follo | owing: | |
| A. If amending name, <u>enter the new name of</u> | the limited liability company here: | |
| The new name must be distinguishable and contain the w | ords "Limited Liability Company," the designation "LI | .C" or the abbreviation "L.I.,C." |
| Enter new principal offices address, if applic | able: | 77 B TI |
| (Principal office address MUST BE A STREE | T ADDRESS) | |
| | | 型 川 |
| Enter new mailing address, if applicable: | | ي بي |
| (Mailing address MAY BE A POST OFFICE) | <u></u> | |
| | | |
| B. If amending the registered agent and/ registered agent and/or the new registered of | | ds, enter the name of the new |
| Name of New Registered Agent: | ANASTASIJA BLANK | |
| New Registered Office Address: | | |
| | Enter Florida street addi | |
| | City , 1 | F lorida 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 |
|--------------|------------------|------------------------|----------------|
| AMBR | OLEG BLANK | 14771 INDIGO LAKES CIR | |
| | | NAPLES, FL 34119 | ■ Remove |
| | | | Change |
| AMBR | ANASTASIJA BLANK | 14771 INDIGO LAKES CIR | Add |
| | | NAPLES, FL 34119 | □ Remove |
| | | | |
| | | | Add TI |
| | · | | Change St |
| | | | ☐ Remove |
| | | | □ Change |
| | · | | |
| | | Remove | |
| | | | Change |
| | | | |
| | | | □ Remove |
| | | | □ Change |

| . | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|----------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------|
| | | | | |
| | | · · · · | | |
| | | | | |
| | | | · · · • | |
| | - | | <u> </u> | |
| | | | | 7 0CT |
| | | | | F 1 L L 54 |
| | | | | 王 |
| · · · · · · · · · · · · · · · · · · · | | | | َ بِي رِي |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Effective date, if other than the da (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department. | does not meet the applicabl | date of filing or more than le statutory filing requi | (optional) 190 days after filing.) Pur rements, this date will | suant to 605.0207 (3)(Finot be listed as the |
| the record specifies a delayed e The 90th day after the record | | an effective time, | at 12:01 a.m. on t | :he earlier of: |
| Dated OCTOBER 19TH | 2017 Will | | | |
| Sign | gnature of a member or authorize | red representative of a mi | ember | |
| ANASTASIJA BLANK | | | | |

Page 3 of 3

Filing Fee: \$25.00