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| (Requestor's Name) | | | |
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| (Address) . | | | |
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| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
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| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
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COVER LETTER

| TO: Registration of Division of O | on Section f Corporations | | | | |
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| DJ RI | EALTY ASSOC | IATES LLC | | | |
| SUBJECT: | | Name of Limited | iability Company | | |
| The enclosed Artic | les of Amendme | ent and fec(s) are submitt | ed for filing. | | |
| Please return all co | orrespondence co | oncerning this matter to t | he following: | | |
| | JERI | EMIAH O'CONNOR | | | |
| | | | Name of Person | | |
| | DJ R | EALTY ASSOCIATES | | | |
| | | | Firm/Company | | |
| | 721 | ASHMONT ROAD | | | |
| | | | Address | | |
| | FRA | ANKLIN LAKES, NJ 07 | | | |
| | | | City/State and Zip Code | | |
| | JRR | YOCNNR@AOL.COM E-mail address: (10 | be used for future annual report notifi | cation) | |
| For further infor | mation concerni | ing this matter, please cal | | | |
| JEREMIAH O'CONNOR | | | 201 410-8739 at () | | |
| | Name of Person | 1 | Area Code Daytime | torifinoise values | |
| Enclosed is a cl | neck for the follo | | ☐ \$55.00 Filing Fee & | S60.00 Filing Fee. | |
| ≡ \$25.00 Fili | ing Fee | \$30.00 Filing Fee & Certificate of Status | Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy (additional copy is enclosed) | |
| <u>Maili</u> | ing Address: | | Street Address: Registration Se | ection | |
| Registration Section | | | Division of Corporations | | |
| Division of Corporations P.O. Box 6327 | | | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 | | |
| Tallahassee, FL 32314 | | | Tallahassee, FL 32303 | | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

DJ REALTY ASSOCIATES LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on MAY 20, 2014 and assigned Florida document number L14000081129 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 721 ASHMONT ROAD Enter new mailing address, if applicable: FRANKLIN LAKES, NJ 07417 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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:

| IGR = Ma MBR = Au | nager ithorized Member | <u>Address</u> | Type of Action |
|----------------------|---------------------------|--|-----------------|
| <u>itle</u> | Name | _ | - |
| иGR | DEAN SYMEONIDES | THE SHERBROOKE OFFICE CENTER II | 🗖 Add |
| | | 201 W. PASSAIC STREET, STREET, SUITE 301 | = Remove |
| | | ROCHELLE PARK. NJ 07662 | |
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| [f amending | gany other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| (If an effecti | date, if other than the date of filing: JUNE 10, 2020 (optional) ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (in the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records. |
| f the record s ecord is filed | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| Dated | JUNE 4th 2020. |
| <u>-</u> | JUNE 4th 2020. June 4th 2020. June 4th 2020. Signature of a member or authorized representative of a member |
| | JEREMIAH O'CONNOR |
| | Typed or printed name of signee |

Filing Fee: \$25.00