L14000083651

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COVER LETTER

TO: Registration Section
Division of Corporations

SOLER REALTY GROUP, 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:

MICHAEL T. SOLER

Name of Person

Firm/Company

14768 SW 65 TERRACE

Address

MIAMI, FL 33193

City/State and Zip Code

TOLSTI@BELLSOUTH.NET

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

For further information concerning this matter, please call:

MICHAEL T. SOLER

,305,949-9155

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)

□ \$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**

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

SOLER REALTY GROUP, 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 I Florida document number <u>L14000083651</u>	Liability Company were filed on _	5/22/2014 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company	here:
The new name must be distinguishable and end with the	words "Limited Liability Company," t	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Estate and the state of the sta		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and		on our records, enter the name of the
registered agent and/or the new registered of	ffice address here:	
Name of New Registered Agent:	MICHAEL T. SOLER	
New Registered Office Address:	14768 SW 65 TER	
New Registered Office Address:		lorida street address
	MIAMI	, Florida 33193
	City	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 the Managers or Authorized Member on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = .Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	SOLER, MARIA E.	14768 SW 65 TER	
		MIAMI, FL 33193	■ Remove
			
		·	□ Remove
 			
			Remove
			□ Add
			□ Remove
			
			Remove
			□ Add
			1 XXX
,			□ Remove

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Filing Fee: \$25.00

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