L140000 98875

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COVER LETTER

TO: Registration Section
Division of Corporations

RL Real Estate Management 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:

Jose Montes

Name of Person

JE Accounting & Tax Services LLC

Firm/Company

6380 Bella Circle Unit 903

Address

Boynton Beach FL 33437

City/State and Zip Code

jmtabs54@gmail.com

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

For further information concerning this matter, please call:

Jose Montes

at (561)

350-5655

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RL Real Estate Management 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 06/20/2014 and assigned Florida document number L14000098875 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 end with the words "Limited 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 ADDRESS) Enter new mailing address, if applicable: (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 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Arcadia M Ledesma	16610 Gateway Bridge Drive	■ Add
		Delray Beach FL 3344	6 □ Remove
			Add
			□ Remove
			
			Add
			Remove
			Add
			□ Remove
			Add
		<i>;</i>	Co □ Remove
		- 1	Remove
			□ Remove

f amending any other information, enter cha	ange(s) here: (Attach additional sheets, if necessary.
Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date the date this document is filed by the Florida Department of	of receipt or filed date and cannot be more than 90 days after
Dated June 26	2014
	 '
This)	·
The solution of the solution o	ember or authorized representative of a member

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