L14000128292

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COVER LETTER

10:	Division of Corporations
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ROYAL CHOICE REALRT AND DEVELOPMENT 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:

TATYANA POLANSK

Name of Person

PROMPTTAX LLC

Firm/Company

145 CYPRESS POINT PKWY STE 203

Address

PALM COAST FL 32164

City/State and Zip Code

PROMPTTAX@GMAIL.COM

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

For further information concerning this matter, please call:

TATYANA

{...}386、503-7721

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

ROYAL CHOICE REALRT AND DEVELOPMENT LLC (Name of the Limited Liability Company as it now appears of

(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 08/15/2014 __ and assigned Florida document number L14000128292 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ROYAL CHOICE REALTY AND DEVELOPMENT LLC 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, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
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lf a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
,	
Effe (The	ective date, if other than the date of filing:
	date this document is filed by the Florida Department of State)
Dat	ed 8-15-14.
	Heksey Kopen
	Signature of a member or authorized representative of a member
	Alexande Korenkov
	Typed or printed name of signee

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Filing Fee: \$25.00