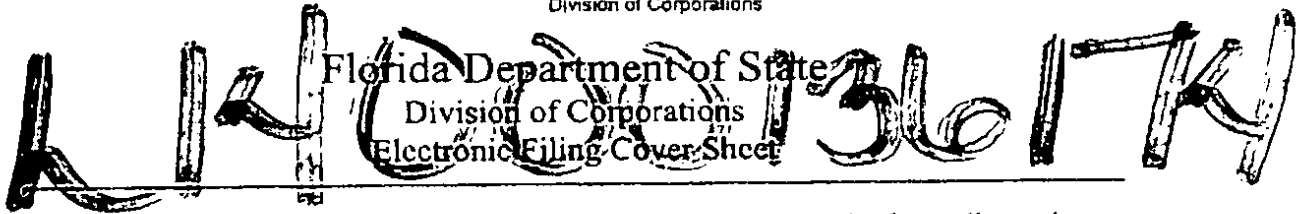


4/24/2019

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000134753 3)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ALBER TAX ACCOUNTANT
Account Number : I20150000098
Phone : (305)713-9142
Fax Number : (815)550-9948

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ACC. ALBER@Hotmail.com

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
REAL ESTATE 2014, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

2019 APR 24 PM 12:40

Electronic Filing Menu

Corporate Filing Menu

Help

T.G.
2/125/19

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REAL ESTATE 2014, 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 08/29/2014 and assigned
Florida document number L14000136174

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1172 S. DIXIE HWY

483

CORAL GABLES, FL 33146

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1172 S. DIXIE HWY

483

CORAL GABLES, FL 33146

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:

1172 S. DIXIE HWY # 483

Enter Florida street address

CORAL GABLES

City

Florida 33146

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

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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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Starchevich Blanco, Luis E	1172 S. DIXIE HWY	<input type="checkbox"/> Add
		# 483	<input type="checkbox"/> Remove
		CORAL GABLES, FL 33146	<input checked="" type="checkbox"/> Change
AMBR	Starchevich Marcovich, Sam V	1172 S. DIXIE HWY	<input type="checkbox"/> Add
		# 483	<input type="checkbox"/> Remove
		CORAL GABLES, FL 33146	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member of a

Signature of a member or authorized representative of a member

LUIS E STARCHEVICH BLANCO

Typed or printed name of signee