## L14000143931

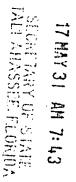
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## **COVER LETTER**

Division of Cor	porations
AMERICA SUBJECT:	LS GLOBAL 1 REALTY, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	endence concerning this matter to the following:
	ADRIANA FERNANDEZ
	Name of Person
	AMERICAS GLOBAL I REALTY, LLC
	Firm/Company
	3251 PONCE DE LEON BLVD.
	Address
	Coral Gables, FL 33134
	City/State and Zip Code
	afemandez@aiolenders.com
	E-mail address: (to be used for future annual report notification)
For further information co	oncerning this matter, please call:
Adriana Fernandez	305 760-6000 at ()
Name of	f Person Area Code Daytime Telephone Number
Enclosed is a check for th	e following amount:
\$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

AMERICAS GLOBAL I REALTY, LLC	
(Name of the Limited Liability Company as it now ap (A Florida Limited Liability Company	pears on our records.)  ny)
The Articles of Organization for this Limited Liability Company were filed on Florida document number L14000143931	09/15/2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	y <u>here</u> :
ONE REALTY INTERNATIONAL LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," to	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	Ä&
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
B. If amending the registered agent and/or registered office address	on our records, enter the name of the ne
registered agent and/or the new registered office address here:	080 # <b>5</b> 0
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.

City

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

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 = Ms $AMBR = As$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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		<del></del>	□ Remove
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ive date, if other than the date of filing:  [ective date is listed, the date must be specific and cannot be prior to date of filing or more than 9	(optional)	ent to 605 (
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nent's effective date on the Department of State's records.		
cord specifies a delayed effective date, but not an effective time, at 90th day after the record is filed.	t 12:01 a.m. on the	e earlier
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Signature of a member or authorized representative of a mem		

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Filing Fee: \$25.00