## L14 000 153 103

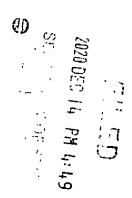
(Re	equestor's Name)	
(Ac	idress)	<del> </del>
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Dx	ocument Number)	)
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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ZA. 5/21

## COVER LETTER

TO: Registration Section Division of Corporations	
	EVE RESITY UC Limited Liability Company
The enclosed Articles of Amendment and fee(s) are	submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
SAN	Name of Person
LE	REVE REALTY UC Firm/Company
533	Avellino ISICS Circle # 32201
	City/State and Zip Code  1. dy Semaan Whotmail. Com  2. css: (to be used for future annual report notification)
E-mail addre	ess: (to be used for future annual report notification)
For further information concerning this matter, plea	se call:
Sandy Semaan Name of Person	at (305) S88-3901  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
■ \$30.00 Filing Fee & Certificate of Statu	
Mailing Address:	Street Address:
Registration Section	Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Le Reve Rea	sty, uc			
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records (Liability Company)	<u>.</u> )		
The Articles of Organization for this Limited Liability Compan Florida document number <u>L 1 4 000 153 103</u>	y were filed on 9779/1	4	and assi	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company here:			
The new name must be distinguishable and contain the words "Limited Liah Enter new principal offices address, if applicable:	oility Company," the designation "LLC"	or the abbrevi	ation "L.L	C."
(Principal office address MUST BE A STREET ADDRESS)		<del>(1)</del>	20.	
Enter new mailing address, if applicable:			2030 DEC 1	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		•	ţ-	!
		÷-	# # #	<u>:</u>
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	: address on our records, <u>enter t</u>	he name of	the Wew	registered
Name of New Registered Agent:	·			
New Registered Office Address:	Enter Florida street address			<del></del>
		rida		
	Ciny	7.	ip 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 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

Title	<u>Name</u>	Address	Type of Action
		<del></del>	□Add
	•	·	□Remove
			Change
AMBR	Michel Saaleh	A34 Terragna Cou	Z Add
		Naples, FL 34119	□Remove
			□Change
<del></del>			□Add
		<del></del>	
		·	□Change
			□ Add
			□Remove
			🗆 Change
<del></del>			□Ađd
			□Change
			□Add
		<del></del>	□Remove
			Chango

	Michel Soaden is hereby added as a
	member of lepeve
	Realty LLC.
,	
	<del></del>
	·
•	
,	
ffect	ive date, if other than the date of filing:
iote:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ocun	nent's effective date on the Department of State's records.
Teco	d 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
d is fi	
ated	December 9, 2020.
	SAMOGIAN
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00