L14000155348

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Name	e) .
(Do	ocument Number)	
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SECRETARY OF STATE

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COVER LETTER

TO: Registration Se Division of Cor	ction" porations		
FERRER H	IOMES LLC		
30bjec1;	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	JOSE A. FERRER		
		Name of Person	
	FERRER HOMES LLC		
		Firm/Company	
	3650 SW 143RD AVE		
		Address	
	MIAMI FL. 33175		
	IOGERPH EROO OHOEM	City/State and Zip Code	
	JOSEFERRER90@HOTM/ E-mail address: (1	AIL.COM to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	all:	
JOSE A. FERRER		305 299-5061	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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

PERKER HUMES LLC	any of it now annouse on our	rocorde)	
(Name of the Limited Liability Comp (A Florida Limited	Liability Company)	records.)	
The Articles of Organization for this Limited Liability Company Florida document number L14000155348	were filed on 09/29/2014		_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	oility company here:		
FERRER REALTY GROUP LLC			
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation	n "LLC" or the abbro	eviation "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)			
	er 11		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he		ecoras, <u>enter tt</u>	ie name of the nev
	-		
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida street	address	
		, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	e performance of my dut provided for in Chapter	ies, and I am far 605, F.S. Or, if irm that the limi	niliar with and inthis document is let liability
company has been notified in writing of this change.			
		के हेर्च	2
If Ch	inging Registered Agent, Sign	子(元)	7
11 C.	ppp (180) <u>Diti</u>		

Page 1 of 3

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>	Address	Type of Action
			□ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
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