

L14000185321

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : SKRIVAN & GIBBS, PLLC
Account Number : I20090000052
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LEA REAL ESTATE INVESTMENTS LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

K. SALY

SEP 27 2016

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LEA REAL ESTATE INVESTMENTS 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:

NACE COHEN, CPA

Name of Person

THE 1031 EXCHANGE CONNECTION, INC.

Firm/Company

3435 10TH ST N, STE 301

Address

NAPLES, FL 34103

City/State and Zip Code

NACE@1031CONNECTION.COM

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

For further information concerning this matter, please call:

NACE COHEN, CPA

Name of Person

at **239** **659-1031**

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

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

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LEA REAL ESTATE INVESTMENTS 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 12/03/2014 and assigned

Florida document number L14000185321

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

11533 TWINING LN

(Principal office address MUST BE A STREET ADDRESS)

POTOMAC, MD 20854

Enter new mailing address, if applicable:

11533 TWINING LN

(Mailing address MAY BE A POST OFFICE BOX)

POTOMAC, MD 20854

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

_____, Florida
City

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

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AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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MGR

THE 1031 EXCHANGE CONNECTION INC

3435 10TH ST N, STE 301

☐ Add

NAPLES, FL 34103

☒ Remove

MGR

JAY WEINER

11533 TWINING LN

☒ Add

POTOMAC, MD 20854

☐ Remove

MGR

MIRIAM WEINER

11533 TWINING LN

☒ Add

POTOMAC, MD 20854

☐ Remove

☐ Add
☐ Remove
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☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)* (((16000238173 3)))

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated AUGUST 27, 2016



Signature of a member or authorized representative of a member

NACE COHEN, CPA

Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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