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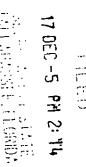
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S. WARREN DEC 1 1 2017

## COVER LETTER

Division of Corp	SOUTH FLORIDA INTL REALTY LLC	
SUBJĘCT:	Name of Limited Liability Company	<del></del>
	Name of Connect Charottly Company	
Γhe enclosed Articles of ∤	Amendment and fee(s) are submitted for filing.	
Please return all correspor	ndence concerning this matter to the following:	
	SENAIT BEIENE	
	Name of Person	
	SOUTH FLORIDA INTL REALTY LLC	
	Firm/Company	
	190 NE 199th St. Suite 107	
	Address	
	Miami, FL 33179	
	City/State and Zip Code	<del>_</del>
	senaitwb@gmail.com E-mail address: (to be used for future annual report notification)	<u></u>
For further information co	oncerning this matter, please call:	
SENAIT BEIENE	305 491-1559	
Name of	Person Area Code Daytime Telephone	Number
Enclosed is a check for the	e following amount:	٠
\$25.00 Filing Fee CVICIX HOUSE	Certificate of Status Certified Copy C (additional copy is enclosed) C	0.00 Filing Fee. eristicate of Status eristica Copy additional copy is enclo

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

SOUTH FLORIDA INTL REALTY LLC			
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now app Limited Liability Compan	ears on our records.) y)	<del></del> .
The Articles of Organization for this Limited Liability C Torida document number 1.14000194575	ompany were filed on	12/23/14	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limi	ted liability company	here:	
he new name must be distinguishable and contain the words "Lim	ited Liability Company," th	ne designation "LLC" or the	abbreviation "L.L.C."
Inter new principal offices address, if applicable:	190 NE 199i	h St, Suite 107	
Principal office address MUST BE A STREET ADDR	ESS) Miami, FL 3	3179	
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)			
3. If amending the registered agent and/or registered agent and/or the new registered office additional Name of New Registered Agent:    SENA   SENA		on our records, ente	r the name of the
· · · · · · · · · · · · · · · · · · ·	E 199th St. Suite 107		
New Registered Office Address.	Enter	Florida street address	
Miami	i	Florida	33179
<del></del>	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.

	2 / E	17 DEC	
If Changing Registered Agent, Signati	ure of New Register	edylgo	ent_
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Page 1 of 3	777.	Hq	
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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records:</u>

MGR = Manager

AMBR = Authorized Member Type of Action Title Address Name \_\_□ Add ☐ Remove \_\_\_\_\_\_D Add \_\_\_ Remove ☐ Change \_□ Remove \_\_\_\_\_ Change \_□ Remove \_ Change \_□ ∧dd \_□ Remove Change Phemove 2: Diff Thange

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ffective date, if other than the data an effective date is listed, the date must be some. If the date inserted in this block ocument's effective date on the Depa erecord specifies a delayed erecord specifies a delayed. The 90th day after the record	specific and cannot be does not meet the a runent of State's rec	eprior to date of filing applicable stanutory cords.	ger more than 90 days a filing requirements,	iller (ding.) Pursuant to 605.0 this date will not be listed	las
Journay area and record					
ated OCTOBER 26	. 2017	· ·			
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	Typed or	printed name of sign	ice	100 A 2:	
		Page 3 of 3		<b>&gt;</b>	

Filing Fee: \$25.00