## 1500030078

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SECRETARY OF STATE

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JUN 1 9 2015

**8 MASON** 

## COVER LETTER

TO:	Registration Se Division of Cor	ection porations		3
CUDIC		ALTY ADVISORS, LLC		
SUBJEC	.1;	Name of Lin	nited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	endence concerning this matter	to the following:	
		Thomas Martucci		
			Name of Person	
		Thomas S. Martucci, Inc.		
		-	Firm/Company	
		613 Lake Orienta Drive		
		<del> </del>	Address	
		Altamonte Springs, FL 32	701	
			City/State and Zip Code	
		thomas@edgerealtyadvisor		
T 6 .1			to be used for future annual report notifi	ication)
For further	er information c	oncerning this matter, please c	ail:	
Ira Bellir	nkoff		407 641-2490 at ()	
	Name o	f Person		: Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is molosed)

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

EDGE REALTY ADVISORS, LLC			
( <u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on our record orida Limited Liability Company)	<u>s.</u> )	
The Articles of Organization for this Limited Liabili Florida document number L15000030078	ty Company were filed on February 18, 2015	and assigned	
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company here:		
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC"	" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AI	DDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or registered agent and/or the new registered office:		, enter the name of the nev	
Name of New Registered Agent:			
New Registered Office Address:			
New Negistered Office Address.	Enter Florida street address		
	, Florida		
	City	orida Zip Code	
New Registered Agent's Signature, if changing Regist	tered Agent:		
I hereby accept the appointment as registered ago provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	nd complete performance of my duties, an ed agent as provided for in Chapter 605, h stered office address, I hereby confirm tha	d I am familiar with and F.S. Or, if this document is:	

Page 1 of 3

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Thomas S. Martucci, Inc.	613 Lake Orienta Drive	<b>⊒</b> Add
		Altamonte Springs, FL 32701	☐ Remove
			Change
			□ Add
			□ Remove
			Change
			□ Remove
			☐ Change
			Add
		<u> </u>	Remove
			☐ Change
		<del>_</del>	SECRETARY DIVISION OF COMMENT SECRETARY TALLAHASSEE
			PORATIONS FIGURE
			Change

, ,	tter change(s) nere: (Attach adainonal sheets, ij he		<u>-</u>
FEIN # L	17-3211847		
			<u>_</u>
	<u> </u>		<del></del>
			·
E. Effective date, if other than the date of	filing: 6/11/15	tional)	
(If an effective date is listed, the date must be speci	fic and cannot be prior to date of filing or more than 90 days aft not meet the applicable statutory filing requirements, the	er filing.) Pursuant	to 605.0207 (3)(l be listed as the
If the record specifies a delayed effect (b) The 90th day after the record is f	tive date, but not an effective time, at 12:01 filed.	a.m. on the	earlier of:
Dated June 15	2015		
Ju Bll		<b>2</b> (0)	<u> </u>
•	e of a member or authorized representative of a member	ECRE!	A JUN SION I
Principal Realty Advisors	Typed or printed name of signee	m	HILL OF CL
		ъ	AM IO:
	Page 3 of 3		: AAA

Filing Fee: \$25.00