

L15000059004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

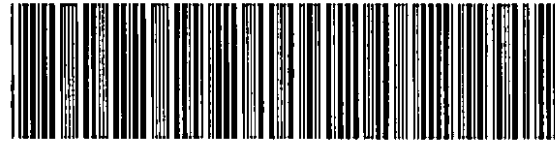
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



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17 JUL 24 AM 11:58

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2017

ABIODUN FALODUN
8227 NW 192ND TER
HIALEAH, FL 33015

SUBJECT: RUBY EXCLUSIVE PROPERTIES, LLC
Ref. Number: L15000059004

We have received your document for RUBY EXCLUSIVE PROPERTIES, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist III

Letter Number: 817A00014142

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RUBY EXCLUSIVE PROPERTIES, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

ABIODUN FALODUN

Name of Person

RUBY EXCLUSIVE PROPERTIES, LLC

Firm/Company

8227 NW 192ND TER

Address

HALEAH, FL 33015

City/State and Zip Code

rubyexclusive15@gmail.com

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

For further information concerning this matter, please call:

ABIODUN FALODUN

786

340-9115

at ()

Name of Person

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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2017 JUL 11 PM 12:30

TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

17 JUL 24 AM 01:50

RUBY EXCLUSIVE PROPERTIES, LLC

(Name of the Limited Liability Company as it now appears on ~~our~~ records.) (Or ~~State~~ TALLAHASSEE FLORIDA)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/03/2015 and assigned
Florida document number L15000059004.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

METROPOLITAN ONE REAL ESTATE SOLUTIONS, LLC

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 ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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17 JUL 24 AM 14:58
32.15.1001 IN 3000
TALMUSSEE FLORIDA

17 JUL 24 AM 14:58
ST. LOUIS, MISSOURI
FALLS, MISSOURI


(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated JULY 8 2017


Signature of a member or authorized representative

Signature of a member or authorized representative of a member

ABIODUN FALODUN

Typed or printed name of signee