

L15000061064

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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DIVISION OF CORPORATIONS
15 MAY 26 PM 5:37
TALLAHASSEE, FLORIDA

MAY 26 2015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASSURED REAL ESTATE 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:

EDGARDO M FOTI

Name of Person

ASSURED REAL ESTATE LLC

Firm/Company

356 SW 13TH AVENUE

Address

POMPANO BEACH FL 33069

City/State and Zip Code

SBOHSE@aol.com

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

For further information concerning this matter, please call:

EDGARDO M FOTI

Name of Person

at (954) 881-0654

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

RECEIVED
DIVISION OF CORPORATIONS
15 MAY -6 AM 10:00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY 26 PM 5:37

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

ASSURED REAL ESTATE 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 4-7-15 and assigned
Florida document number L15000061064

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 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:

EDGARDO M FOTI

New Registered Office Address:

1421 SW 17 ST

Enter Florida street address

BOCA RATON

City

Florida

33486

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.

x CMF

If Changing Registered Agent, Signature of New Registered Agent

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

ONLY NAME AND ADDRESS OF
MIGRM HAS BEEN CHANGED

AND THE REGISTERED AGENT
NAME AND ADDRESS HAS BEEN
AMENDED

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

(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)

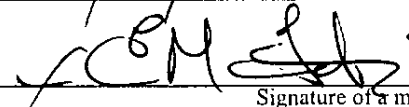
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

X 4/30/15



Signature of a member or authorized representative of a member

EDGARDO M FOTI

Typed or printed name of signee

FILED
15 MAY 26 PM 5:37
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA