L15000074996

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J. HARRIS

COVER LETTER

TO: Registration Se Division of Cor			
	Realty, LLC		
SUBJECT:	Name of Limi	ted Liability Company	.
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ondence concerning this matter t	o the following:	
	Steve L. Waserstein		
		Name of Person	
	WNF Law, P.L.		
		Firm/Company	
	1111 Brickell Ave., Suite 2	200	
		Address	
	Miami, FL 33131		
		City/State and Zip Code	
	searches@wnflaw.com	to be used for future annual report notif	cation)
			(valion)
For further information of	concerning this matter, please ca	nı:	
Steve L. Waserstein		305 760-8500 at ()	
Name o	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	he following amount:		
\$25,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Red & Blu Realty, LLC		
(Name of the Limited Liai (A Flo	bility Company as it now appears on our record rida Limited Liability Company)	1.)
The Articles of Organization for this Limited Liability	y Company were filed on April 28, 2015	and assigned
Florida document number L15000074996		
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "I	imited 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 AD	DRESS)	
		(°)
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
		50 50
B. If amending the registered agent and/or re registered agent and/or the new registered office a		s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	IJ
		orida
	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>	Address	Type of Action
MGR	Burns, Maia	2500 E Hallandale Beach Blvd	Add
		Suite 708	■ Remove
		Hallandale Beach, FL 33009	Change
			Add
			□ Remove
			Change
			□ Remove
			☐ Change
			Renfove
			Change PH 3: 5
			Change
			Add
			□ Remove
			☐ Change

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Note: If the date inserted in this document's effective date on the ne record specifies a delay. The 90th day after the re	block does not meet the applicable statutory filing requirement Department of State's records. ed effective date, but not an effective time, at 12	nts, this date will not be listed :
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Note: If the date inserted in this document's effective date on the se record specifies a delay. The 90th day after the respective dated.	block does not meet the applicable statutory filing requirement. Department of State's records. ed effective date, but not an effective time, at 12 ecord is filed. 2015, Signature of a member or authorized representative of a member. Typed or printed name of signee	2:01 a.m. on the earlier
Note: If the date inserted in this document's effective date on the ne record specifies a delay. The 90th day after the record of the Dated June 16	block does not meet the applicable statutory filing requirement. Department of State's records. ed effective date, but not an effective time, at 12 ecord is filled. 2015, Signature of a member or authorized representative of a member	2:01 a.m. on the earlier