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(Re	equestor's Name)			
(Ac	ldress)			
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(Cit	ty/State/Zip/Phone	e #)		
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(Bu	isiness Entity Nan	ne)		
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COVER LETTER

Div	ision of Cor	porations		
SUBJECT:		e Real Estate, LLC		
SODJECT.				
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		Jamie Zambrana		
			Name of Person	
		Right Angle Real Estate		
			Firm/Company	
		16255 Sierra Palms Drive		
			Address	
		Delray Beach, FL 33484		
			City/State and Zip Code	
		jamie@rightanglere.com	to be used for future annual report notif	
			•	ication)
For further in	nformation co	oncerning this matter, please ca	all:	
Jamie Zambi	rana		561 756 2615	
	Name of	Person	Area Code Daytime	e Telephone Number
Enclosed is a	check for th	e following amount:		
□ \$25.00 F	iling 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:

TO: Registration Section

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

Right Angle Real Estate, LLC		
(Name of the Lim	ited Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records.) ny)
The Articles of Organization for this Limited	Liability Company were filed on	05/04/2015 and assigned
Florida document number L15000080537	·	
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company	y here:
The new name must be distinguishable and contain the	words "Limited Liability Company," t	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	•
		À. 😝
Enter new mailing address, if applicable:		6 A
(Mailing address MAY BE A POST OFFICE		70
		<u> </u>
B. If amending the registered agent and	d/or registered office address	on our records, enter the name of the new
registered agent and/or the new registered (95 95
Name of New Registered Agent:	Jamie Zambrana	
N. Paris 1000 Aller	12161 Ken Adams Way Suite	110-C
New Registered Office Address:		Florida street address
	Wellington	, Florida ³³⁴¹⁴
	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 Charging Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	House, Frederick S	511 Bayshore Dr, Apt 806	
		Ft Lauderdale, FL 33304	Remove
			☐ Change
MGR	House, Frederick	511 Bayshore Dr. Apt 806	
		Ft Lauderdale, Fl 33304	Remove
			□ Change
AMBR	Rosenthal Property Holdings, Inc	13392 Doubletree Circle	
		Wellington, FL 33414	Remove
			Change
			Add
			Remove Change Change Change
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		3/4/16		(4° 1)	
tive date, if other than the fective date is listed, the date must	t be specific and cannot be p	rior to date of filing	or more than 90 day	(optional) s after filing.) Pursuant	to 605
If the date inserted in this blo nent's effective date on the De	ock does not meet the app	olicable statutory	filing requirement	s, this date will not	be liste
nent's effective date on the De	partment of State's reco	us.			
ecord specifies a delayed	offactive date, but	not an offocti	ivo timo, at 12:	01 am on the	oarlie
e 90th day after the reco	ord is filed.	not an enect	ive time, at 12.	or a.m. on the	Carne
	2016	_	11		
March 4			// /		
l March 4					
1	Signature of a member or a				

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Filing Fee: \$25.00