## 15000128240

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## **COVER LETTER**

... ТО:

Registration Section Division of Corporations

Tallahassee, FL 32314

	RSINC PRIME REALTY LLC		
SUBJECT:	Name of Litt	nited Liability Company	<del></del> -
	Amendment and fee(s) are sub indence concerning this matter	<del>-</del>	
	LEANDRO TELES		
		Name of Person	
	INVESTORSING PRIME	REALTY LLC	
		Firm/Company	<del></del>
7550 FUTURES DRIVE, SUITE 306			
		Address	
	ORLANDO, FL 32819		
		City/State and Zip Code	
	telescorpgroup@gmail.com		
	E-mail address: (	to be used for future annual report notification)	
For further information c	oncerning this matter, please co	all:	,. <del>*</del>
Leandro Teles		407 350-0027	
Name o	f Person	Area Code Daytime Telephone N	umber
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cer (additional copy is enclosed) Cer	.00 Filing Fee. rtificate of Status & rtified Copy fitional copy is enclosed)
Mailing Address Registration S Division of C	Section	Street Address: Registration Section Division of Corporations	
P.O. Box 632	.7	The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INVESTORSING PRIME REALTY LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number L15000128280	any were filed on 07/28/2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	2	
		707
	-	2021 DEC
Enter new mailing address, if applicable:		· - O
Mailing address MAY BE A POST OFFICE BOX)		
Truming dadress that BEAT OUT OF THEE BOLD	<del> </del>	
3. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ice address on our records, <u>enter th</u>	. <u>1</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	ida
<del></del>	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>	Name	Address	Type of Action
MGR	Antonio Dugin	7524 Seurat Street, Ap. 104	□Add
		Orlando, FL 32819	≣Remove
			□Change
	<del></del>		
			□Remove
			Change
			Remove
			—□Change
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