

215000129951

(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:

Office Use Only



800303919678

10/02/17--01007--015 **25.00

FILED
17 OCT -2 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

OCT 03 2017

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LY REAL ESTATE & INVESTMENT, 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:

LI ROGOF
Name of Person
LY REAL ESTATE & INVESTMENT, LLC
Firm/Company
4460 HODGES BLVD, #1402
Address
JACKSONVILLE, FL 32224
City/State and Zip Code
durangroupa@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LI ROGOF 305 922-1771
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

L.R

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

LY REAL ESTATE & INVESTMENT, 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 07/29/2015 and assigned
Florida document number L15000129951.

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:

5401 NW 72ND AVE

(Principal office address MUST BE A STREET ADDRESS)

MIAMI, FL 33166

Enter new mailing address, if applicable:

4460 HODGES BLVD, #1402

(Mailing address MAY BE A POST OFFICE BOX)

JACKSONVILLE, FL 32224

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:

LI ROGOF

New Registered Office Address:

4460 HODGES BLVD, #1402

Enter Florida street address

JACKSONVILLE

Florida 32224

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.

Rogof
If Changing Registered Agent, Signature of New Registered Agent

FILED
JUL 29 2015
CLERK OF
STATE
TALLAHASSEE,
FLORIDA

MGR = Manager
AMBR = Authorized Member

FILED
Change
17 OCT -2 PM 2:19
Remove
Change
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

[illegible]

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 SEPTEMBER 15, 2017

Signature of a member or authorized representative of a member

LI ROGOF

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
17 OCT -2 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA