# L15000/45004

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)	·····	
(Cit	ry/State/Zip/Phone	÷#)	
PICK-UP	☐ WAIT	MAIL	
(Ви	siness Entity Nam	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to	Filing Officer:		

Office Use Only



300276286653

09/04/15--01011--008 \*\*25.00

FILED
2015 SEP -4 PM 3: 53
SECRETARY OF STATE

k.saly examiner SEP -8 2015

#### **COVER LETTER**

Division of Corp	orations	Y	•
subject: Glabal	Real Estate Ac Name of Limi	SSCTTEAM Opport	unity Realty, LLC.
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Nicholas Bri	Name of Person	
	Catalata Global	Real Estate Asset Te Firm/Company	am opportunity Realty
	333 Las Olas	Way, CU#4, Suit	te #429, Fort Lauderdale, F 3330
	Fort Lander	City/State and Zip Code	
	- 11	amail. Com	ication)
For further information co	ncerning this matter, please ca	all:	
Nicholas Brid	Hon Person	at (934) 47D- Area Code Daytime	5729 Telephone Number
Enclosed is a check for the	e 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:

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

## TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on August 24, 2015 and assigned
Florida document number L 15000145004.

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 "LLC" or the abbreviatio

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:

		, Florida
New Registered Office Address:	Enter Florida street ad	dress
Name of New Registered Agent:		

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

### MGR = Manager AMBR = Authorized Member <u>Title</u> <u>Address</u> **Type of Action Name** PL, 33308 Nicholas Britton 4501 NE 21st Ave, Fort Landerdale MAdd ☐ Remove □ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change

or removed from our records:

· ——				
				E N
			<del></del>	FEE SE
<del>-</del>				
	· <del></del>			ASSECTION S.
				<u>بن برک</u> بن جگرک
				A PORT
				<u>,                                     </u>
	· · · · · · · · · · · · · · · · · · ·			<del></del>
	<del></del>			
an effective tote: If the ocument's	date, if other than the date of filing: date is listed, the date must be specific and cate date inserted in this block does not meet effective date on the Department of States	unnot be prior to date of filing et the applicable statutory te's records.	or more than 90 days after filing requirements, the	is date will not be listed a
The 90t	specifies a delayed effective dat h day after the record is filed.	e, but not an ellecti	ve time, at 12:01	a.m. on the earner o
ated		<u> </u>		
-	Cighth Signature of a me	mber or authorized represent	tative of a member	
	Flizabeth Ma			

Page 3 of 3

Filing Fee: \$25.00