## L15000150979

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## **COVER LETTER**

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CUD IDOT.		Investments LLC			
SUBJECT:		Name of Lim	nited Liability Company		
The enclose	ed Articles of	Amendment and fec(s) are sub	omitted for filing.		
Please retur	n all correspo	ondence concerning this matter	to the following:		
		Lourdes Reyes			
			Name of Person	<del></del>	
		Real Group Investments L	LC		
			Firm/Company		
		14230 Cypress Court			
			Address	···-	
		Miami Lakes, FL 33014			
			City/State and Zip Code		
		lreyes14230@gmail.com			
For further	information o	E-mail address: ( oncerning this matter, please e	to be used for future annual report not	tification)	
		oncerning this matter, prease c			
Lourdes Re			305 796-3033 at ()		
	Name o	f Person	Area Code Daytir	ne Telephone Number	
Enclosed is	a check for th	ne following amount:			
\$25.00	Filing Fee	S30.00 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: Registration Section		Street Address: Registration So	ection		
Division of Corporations			Division of Corporations		
	O. Box 632		The Centre of		
3.1	ıllahassee, I	FL 34314	Z410 IN. MONTO	oe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Real Group 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  $\frac{09/03/2015}{}$ Florida document number \_\_\_\_L15000150929 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." 14230 Cypress Court Enter new principal offices address, if applicable: Miami Lakes, FL 33014 (Principal office address MUST BE A STREET ADDRESS) 14230 Cypress Court Enter new mailing address, if applicable: Miami Lakes, FL 33014 (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address . Florida

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.

City

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	Annelise Reyes		□Add
		6301 Collins Ave., Apt. 2908, Miami Beach, FL 3314	∏ _ <b>≡</b> Remove
			_ □Change
MGR	Matthew Reyes		_ □∧dd
		16421 Fox Den Court, Miami Lakes, FL 33014	_ <b>=</b> Remove
			_ Change
			_ □Add
			□Remove
			_
			_ □Add
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Effective date, if other that if an effective date is listed, the d	late must be specific a	and cannot be prior	r to date of filing or	nore than 90 days after	filing.) Pursuant to 605.0207
Note: If the date inserted in document's effective date or				ng requirements, this	date will not be listed as
e record specifies a delayed e	effective date, but n	ot an effective t	ime, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
rd is filed.					
Dated July 24		2020			
Dated		<del></del>	<del>//</del> :		
			\( \sqrt{\chi}		
		a member or auth	orbed representativ	c of a member	

Filing Fee: \$25.00