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S. YOUNG

COVER LETTER

TO: I	Registr Divisio	ation Secti n of Corpo	on rations			
SUBJEC		ace Coast F	Real Estate Services, LLC			
SUBJEC	· I ·		Name of Lim	ited Liability Company	_	
The enclo	sed Ar	ticles of Ar	nendment and fee(s) are sub-	mitted for filing.		
Please ret	turn all	correspond	ence concerning this matter	to the following:		
			Dario Muleris			
				Name of Person		
Mizner Property Management, Inc.						
				Firm/Company		
			1908 NW 4th Avenue, #11	12		
Address						
			Boca Raton, FL 33432			
				City/State and Zip Code		
			dmuleris@bocaapts.com			
			E-mail address: (1	to be used for future annual report notification)	電影 遵 ·	-77
For furthe	er infor	mation con-	cerning this matter, please ca	all:	12 12 12 12 12 12 12 12 12 12 12 12 12 1	
Jon Klasi	feld			561 368-5555 at ()		
		Name of P	erson	Area Code Daytime Telephone Num	iber GRA GR	
Enclosed	is a ch	eck for the	following amount:			
\$25.0	00 Filin	g Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif	Filing Fee, ficate of Status & fied Copy onal copy is enclosed)	J

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Space Coast Real Estate Services, LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records. ed Liability Company))
The Articles of Organization for this Limited Liability Compa Florida document number L15000174383	any were filed on October 13, 2015	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and contain the words "Limited Li-	iability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		SEORE TO
(Mailing address MAY BE A POST OFFICE BOX)		· 第二十
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	
N	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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Dunning, Debra	1908 NW 4th Ave, #112	Add
		Boca Raton, FL 33432	■ Remove
			☐ Change
AMBR Klasfeld, Jon	Klasfeld, Jon	1908 NW 4th Ave, #112	Add
		Boca Raton, FL 33432	Remove
			Change
MGR T	TCPA Properties, Inc.	1908 NW 4th Avenue, #112	<u> </u>
		Boca Raton, FL 33432	Remove.
			Change
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			□ Remove
			Change