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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO:	Registration Se Division of Cor			
eup:		TY & ASSOCIATES, LLC		
SUB	JECT:		ited Liability Company	
The e	enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Pleas	e return all correspo	ndence concerning this matter	to the following:	
		MARIA BOURZAC		
			Name of Person	
		MB REALTY & ASSOCI	ATES, LLC	
			Firm/Company	<u>.                                    </u>
		122 HIALEAH DRIVE		
			Address	
		HIALEAH, FL. 33010		
		MARIABOURZAC@GMA	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notifi	cation)
For fu	arther information co	oncerning this matter, please co	all:	
MAR	IIA BOURZAC		305 546-0941 at ( )	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclo	sed is a check for th	ne following amount:		
<b>S</b>	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:

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

MB REALLY & ASSOCIATES, LLC		
(Name of the Limited Liability Compa (A Florida Limited I	any as It now appears on our re Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company lorida document number 1.15000180618	were filed on OCT.23.2015	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation '	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	122 HIALEAH DRIVE	
Principal office address MUST BE A STREET ADDRESS)	HIALEAH, FL. 33010	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or address her		SECRE ARY OF STAR POR of the ords, enterphonomers
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ac	ddress
		, Florida
	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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	MARIA BOURZAC	122 HIALEAH DRIVE, HIALEAH,FL. 33010	🗖 Add
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Typed or printed name of signee

Filing Fee: \$25.00