Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000148515 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : DOMINIUM CONSULTING SERVICES, LLC

Account Number : I20180000103 Phone : (407)374-2329

: (407)412-5926 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BARUCH REALTY LLC

0
0
01
\$25.00

Y SULKEP



May 20, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BARUCH REALTY LLC 9450 SW 145 PL MIAMI, FL 33186US

SUBJECT: BARUCH REALTY LLC

REF: L15000201418

We have received your document for BARUCH REALTY LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

Please check the appropriate box on page 2 The company name must be same throughout the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker Regulatory Specialist III

FAX Aud. #: H19000323414 Letter Number: 520A00010184 Page: 5 05/20/2020 10:48 AM TO:18506176383 FROM:3213199949

COVER LETTER

TO: Registration Sc Division of Cor			
CT	REALTY LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	CELITON CARDOSO		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	DOMINIUM CONSULTE	NG SERVICES	
		Firm/Company	
	6965 PIAZZA GRANDE	AVE - SUITE 206	
		Address	
	ORLANDO FLORIDA 32	835	
		City/State and Zip Code	
	SERVICES@DOMINIUM	CS.COM to be used for future annual report	notification)
			(Minada)
For further information of	concerning this matter, please co	all:	
CAMILA		407 374-232	
Name	of Person	at () Area Code Da	ytime Telephone Number
Enclosed is a check for	the 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:

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 Page: 6 05/20/2020 10:48 AM TO:18506176383 FROM:3213199949

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BARUCH REALTY LLC (Name of the Limi	ted Liability Compa	nny as it now appears on our records.)			
\ <u></u>	(A Florida Limited	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited L	iability Company	were filed on 11/25/2015	and assigned		
Florida document number 1.15000201418					
This amendment is submitted to amend the foll	owine.				
A. If amending name, enter the new name of	of the limited liab	ility company here:			
BARUCH HOME SERVICES, LLC					
The new name must be distinguishable and contain the	words "Limited Liabi	fity Company," the designation "LLC" or the	abbreviation "L.L.C."		
Enter new principal offices address, if applic	cable:	2923 BANANA PALMS			
(Principal office address MUST BE A STREE		KISSIMMEE - FLORIDA 34747			
			<u>.</u>		
Enter new mailing address, if applicable:		2923 BANANA PALMS	75.29		
(Mailing address MAY BE A POST OFFICE BOX)		KISSIMMEE - FLORIDA 34747	28		
			3.		
			20		
B. If amending the registered agent and	l/or registered o	office address on our records, ent	er the name of the ne		
registered agent and/or the new registered (office address her	<u>re</u> :			
Name of New Registered Agent:	DOMINIUM (CONSULTING SERVICES, LLC			
New Registered Office Address:	6965 PIAZZA	GRANDE AVE SUITE 206			
the Megistered Office Address.		Enter Florida street address			
	ORLANDO	Florida	32835		
		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.

Clitter C.

If Changing Registered Agent, Signature of New Registered Agent

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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	BENEDITO PAES DO AMARAL NETO	2923 BANANANPALMS DR 34747 KISSIMMEE - FL	Add
			☐ Remove
AMBR	BEATRICE FERNANDES DO AMARAL	2923 BANANA PALMS DR 34747 KISSIMMEE - FL	
			□ Remove
			☑ Change
			Add
			Remove
			Change
			Add
			☐ Remove
			Remove
			Change
	14		
			☐ Remove
			☐ Change

PL	EASE UPDATE THE N	4EMBERS ADI	DRESS AS WEL	I. TO: 		
29	23 BANANA PALMS I	CISSIMMEE - F	LORIDA, 34747			
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Note: 1	re date, if other than entire date is listed, the date if the date inserted in this nt's effective date on the	s block does not	meet the applicat	o date of filing or more ole statutory filing to	(optional) than 90 days after filing, equirements, this date	Pursuant to 605 020 will not be listed a
If the reco	ord specifies a dela 90th day after the I	yed effective ecord is filed	date, but not !.	an effective tim	ee, at 12:01 a.m.	on the earlier (
Dated _	MAY 12		2020	_ ·		
	\$ PAN				a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00