L16000015588

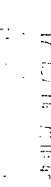
(Requestor's Name)
(Address)
(issuess)
(Address)
(City (Charle III) (Dhana H)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Codification of Coding
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100305617721

11/14/17--01048--032 *+25.00



COVER LETTER

то:	Registratio Division of	n Section Corporations
CHDIC	REAL	STATE MOLLY & DES LLC
SOBJE	Name of Limited Liability Company	
The enc	closed Article	s of Amendment and fee(s) are submitted for filing.
Please r	eturn all corr	espondence concerning this matter to the following:
		CHRISTIAN DE CESARE
		Name of Person
		REAL STATE MOLLY & DES LLC
		Firm/Company
		15520 SW 80TH ST APT B202
		Address
		MIAMI, FL 33193
		City/State and Zip Code
		CHRISTIAN@GLAELEC.COM
		E-mail address: (to be used for future annual report notification)
For furth	her information	on concerning this matter, please call:
GUSTA	VO FIRINU	
	Nai	ne of Person Area Code Daytime Telephone Number
Enclosed	d is a check f	or the following amount:
■ \$2 5.	00 Filing Fee	Certificate of Status □ \$30.00 Filing Fee & □ \$60.00 Filing Fee. Certificate of Status □ \$60.00 Filing Fee. Certificate of Status & 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 ARTICLES OF ORGANIZATION **OF**

REAL STATE MOLLY & DES LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florid	da Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L16000015588	Company were filed on 01/22/2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	(RESS)	
Enter new mailing address, if applicable:		
		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent: New Registered Office Address:	istered office address on our records, enterdress here: Enter Florida street address	the name of the new
	Enter Florida street address	. =
	, Florida	
Now Designated Asset Circuit 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	City	Zip Code
New Registered Agent's Signature, if changing Registere	ed 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>	Address	Type of Action
MGRM	CHRISTIAN DE CESARE	15520 SW 80TH ST APT B202	
		MIAMI, FL 33193	■ Remove
			Change
MGR	VALE VALENS LLC	16192 COASTAL HIGHWAY	= Add
		LEWES, DE 19958	Remove
			Change
			Add
			Remove
			Change
			□-Add
			Remove
			. D Change
			Āḍḍ
			Remove
			Change
			Add
			□ Remove
			Change

	
	. 7
	5
11/01/2017	
ective date, if other than the date of filing: 1 effective date is listed, the date must be specific and cannot be prior to date of 1 the date inserted in this block does not meet the applicable state 2 cument's effective date on the Department of State's records.	(optional) f filing or more than 90 days after filing.) Pursuant to 605.
record specifies a delayed effective date, but not an ef he 90th day after the record is filed.	fective time, at 12:01 a.m. on the earlie
ed OCTOBER 27 2017	
Signature of a member or authorized rep	Chuzho -
Signalitie of a member or authorized rec	presentative of a member

Page 3 of 3

Filing Fee: \$25.00