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SECRETARY OF STATE
AND SECRETARY

K. SALY DEC 14 2017

SUBJECT:	AY GROUP, L.L.C.	1	
	Name of Limited Liability Company		
The enclosed Articles of Amendment	and fee(s) are submitted for filing.		
Please return all correspondence conc	erning this matter to the following:		
ЈАСК В	HANSON		
	Name of Person		
ТНЕ МІ	 ELROSE REALTY GROUP, L.L.C. 		
	Firm/Company		
16(X) W	 EST COLONIAL DRIVE		
	Address		
ORLAN	 fDO, F1, 32804 		
	City/State and Zip Code		
JHANSO	N@MELROSECORPORATION.COM		
	E-mail address: (to be used for future annual report notification)		
For further information concerning th	 us matter, please call: -		
JACK B. HANSON	407 228-4181 at ()		
Name of Person	Area Code Daytime Telephone Number		
Enclosed is a check for the following	amount:		
_	Filing Fee & S55.00 Filing Fee & S60.00 Filing ficate of Status Certified Copy Certificate of Certified Copy is enclosed) Certified Copy Certified Copy (additional copy is enclosed)	f Status &	
MAILING ADDR Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 32.	Registration Section ations Division of Corporations Clifton Building		

THE MELROSE REALTY GROUP, L.L.C. (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 $\frac{2/23/2016}{2}$ and assigned TILE S PROPERTY Florida document number 1.16000037724This 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 abbrevi Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (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:

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

Enter Florida street address

, Florida

<u>Title</u> .	<u>Name</u>	Address	Type of Action
MGR	HANSON, JEAN M	1600 WEST COLONIAL DRIVE	
		ORLANDO, FL 32804	■ Remove
		1600 WEST COLONIAL DRIVE	□ Change
MGR	VINSON, GLORIA	ORLANDO, FL 32804	■ 'Add
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E. Effecti	ve date, if other than t	he date of filing: (optional)	
(If an effi Note:	ective date is listed, the date r If the date inserted in this	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.	207 (3)(b) as the
If the rec (b) The	ord specifies a delay 90th day after the r	 yed effective date, but not an effective time, at 12:01 a.m. on the earlier ecord is filed.	of:
Dated	DECEMBER 11	2017	
Dated		DE Z	
		Signature of a member or authorized representative of a member	
	JACK B. HANSON		
		Typed or printed name of signee	
		Page 3 of 3	
		Filing Fee: \$25.00	