L16000045995

(Re	equestor's Name)	 		
(Ac	ddress)			
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COVER LETTER

INFINITY SUBJECT:	Y REALTY SERVICES I LLC				
SUBJECT,	Name of Limited Liability Company				
The enclosed Articles of	of Amendment and fee(s) are submitted for filing.				
Please return all corresp	pondence concerning this matter to the following:				
	JOHN MONINO				
	Name of Person				
	INFINITY REALTY SERVICES 1 LLC				
Firm/Company					
6175 NW 153RD STREET #328					
Address					
	MIAMI LAKES, FL 33014				
	JMONINO@INFINITYREALTYPM.COM				
	E-mail address: (to be used for future annual report notification)				
For further information	n concerning this matter, please call:				
SHARI KINDLE	844 545-0414				
Name	at () e of Person				
Enclosed is a check for t	the following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Certificate of Status	of Status & opy			

MAILING ADDRESS:

TO: Registration Section

Division of Corporations

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

(Name of the Limited Liability Company as it now appears on our record (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on MARCH 4, 2016	
The Articles of Organization for this Limited Liability Company were tiled on MARCH 4, 2016	
Florida document number L16000045995	and assigned
This 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	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
- <u></u>	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	76,
	Pp
B. If amending the registered agent and/or registered office address on our record registered agent and/or the new registered office address here:	ls, enter the name of the new
Name of New Registered Agent: SHARI KINDLE	1:5
New Registered Office Address:	
Enter Florida street addre	SS.

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

Shari Kendle

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	MATTHEW H ARBOGAST	6175 NW 153RD STREET #328	
		MIAMI LAKES, FL 33014	Remove
		6175 NW 153RD STREET #328	☐ Change
AMBR	SHARI KINDLE	MIAMI LAKES, FL 33014	☐ Add
			☐ Remove
			□ Change
			Add
			□ Remove
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fective date, if other than the effective date is listed, the date in this cument's effective date on the	block does not	t meet the app	licable sta	2 700 filing or mo tutory filing	re than 90 days	optional) after filing.) Purs this date will t	uant to 605 not be liste
record specifies a delay The 90th day after the re			not an e	ffective tir	ne, at 12:	01 a.m. on t	ne earlie
ted APRIL 12		_, 2016	·				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00