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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

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MAR 3 1 2016 J. HARRIS

COVER LETTER

Division of C	orporations	•	
	NS Realty Group, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Terrence J Forgie, Jr		
		Name of Person	
	OPTIONS Realty Group,	LLC	
		Firm/Company	
	104 SE Atlantic Drive		
		Address	
	Lantana, Fl 33462		
		City/State and Zip Code	
	elayneforgie@gmail.com		
		to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
Elayne Forgie		561 398-0575	
Name	of Person		e 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

TO:

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

iny as it now appears on our records Liability Company)	.)
were filed on March 21, 2016	and assigned
ility company here:	
lity Company," the designation "LLC"	or the abbreviation "L.L.C."
2328 10th Ave N #600	
Lake Worth, Fl 33461	
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	C9 = +7
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•	27 70 177
	AS E
	DRIE 19
ffice address on our records, <u>e</u> :	enter the name of the
Enter Florida street address	
	rida Zip Code
	ility company here: lity Company," the designation "LLC" 2328 10th Ave N #600 Lake Worth, Fl 33461

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>	Address	Type of Action
AMBR	Elayne Forgie	104 SE Atlantic Dr	Add
		Lantana, Fl 33462	■ Remove
			Add
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Marie Physical Property Communication Commun			-	-
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	ie date of filing:	23/2016	(option	al)
fective date, if other than tl	ust be specific and cannot	be prior to date of filing or r	nore than 90 days after fill	ing.) Pursuant to 605,020
an effective date is listed, the date m	DIOCK HOES HOLDICELING		.5 rodanomento, uno a	
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Filing Fee: \$25.00