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COVER LETTER

	Registration Se Division of Cor						
CHD IEC		ESTING & CONSULTING, L	LC				
SUBJEC	Name of Limited Liability Company						
The enclo	osed Articles of .	Amendment and fee(s) are sub	unitted for filing.				
Please ret	turn all correspo	ndence concerning this matter	to the following:				
		EHUD SIMHI					
Name of Person							
			Firm/Company				
		2575 NE 214TH ST					
			Address				
		MIAMI, FLORIDA 33180					
		City/State and Zip Code					
		SIVANHALEY1705@GMAIL.COM E-mail address: (to be used for future annual report notification)					
For furthe	er information co	oncerning this matter, please ca	·				
EHUD S	ІМШ		561 3034807				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed	is a check for th	e following amount:					
\$25.0	0 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:

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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

L.D.A INVESTING & CONSULTING, LLC (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 $\frac{06/02/2016}{1}$ and assigned Florida document number L16000107414 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: L.D.A REAL ESTATE 1, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." 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: Enter Florida street 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 limiting 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

		☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change
		☐ Change ☐ Add ☐ Remove ☐ Change
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		P. Add F. L. L. Reffiove

. If am	nending any other information, enter change(s) he	re: (Attach additional sheets, i	if necessary.)
			
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(If an et Note:	tive date, if other than the date of filing: [flective date is listed, the date must be specific and cannot be price. If the date inserted in this block does not meet the applianent's effective date on the Department of State's record.	r to date of filing or more than 90 day cable statutory filing requirement	(optional) s after filing.) Pursuant to 605.0207 (3 s, this date will not be listed as th
the re) The	cord specifies a delayed effective date, but no e 90th day after the record is filed.	ot an effective time, at 12:	01 a.m. on the earlier of:
Dated	July 11 2013]	3 7
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	Typed or prin	ted name of signee	985 £

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Filing Fee: \$25.00