# 16000107414

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SECRETARY OF STATE ON SECRETARY OF CORPORATIONS

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## **COVER LETTER**

Division of Co	rporations		
L.D.A RE.	AL ESTATE 1. LLC		
30b)ECT		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
•	EHUD SIMHI		
		Name of Person	
		Firm/Company	
	2575 NE 214th ST		
	<del></del>	Address	
	MIAMI, FL 33180		
		City/State and Zip Code	
	NissanRealEstate@gmail.co	om to be used for future annual report notifi	in the second se
Dan formban in formation a			icanon)
For further information (	concerning this matter, please ca	III:	
EHUD SIMHI		215 470-4748 at ()	
Name o	of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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:

TO:

Registration Section

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 REAL ESTATE 1, LLC		
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability (Florida document number L16000107414	Company were filed on <u>06/02/2016</u>	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	
Enter new principal offices address, if applicable:		SE SEVICE
(Principal office address MUST BE A STREET ADD	RESS)	AUG
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		F CORPORATIONS -3 PM 3: 29
B. If amending the registered agent and/or registered agent and/or the new registered office add		enter the name of the no
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Floric	da
		Zip Code

### 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
MGRM	RAZUMOV, ALEXANDER	2575 NE 214TH ST	
		MIAMI, FL 33180	= Remove
			Change
MGRM	REIDEL, VALERY	2575 NE 214TH ST	Add
		MIAMI, FL 33180	■ Remove
			Change
MGRM	DIAMORE, LEONARDO	2575 NE 214TH ST	■ Add
		MIAMI, FL 33180	□ D
			Change
			D Add
		<del></del>	□ Remove
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Effective date, if other than the	he date of filing	ç:		(opt	tional)	
If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	block does not m	neet the applicab	date of filing or ole statutory fil	more than 90 days afting requirements, th	er filing.) Pursuant to iis date will not be	605.0207 listed as
ne record specifies a delay The 90th day after the re	ed effective d ecord is filed.	ate, but not	an effective	time, at 12:01	a.m. on the e	arlier of
Dated JUNE 6	,	2018				
	Chud Sim		- [	1		

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee