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COVER LETTER

TO:	Registration Sec Division of Corp			
SHDIE	JOSE MAR'	TI REALTY HOLDINGS, LL	.c	
SUBJE	CI:		ited Liability Company	
The enc	losed Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspon	dence concerning this matter	to the following:	
		Brian J. Thanasiu, Esq.		
			Name of Person	
		Cheffy Passidomo, P.A.		
			Firm/Company	
		821 Fifth Avenue South		
			Address	
		Naples, Florida 34102		
			City/State and Zip Code	
		bjthanasiu@napleslaw.com		
		E-mail address: (t	to be used for future annual report notif	ication)
For furtl	her information co	ncerning this matter, please ca	all;	
Brian J.	Thanasiu, Esq.		239 436-1524 at ()	
	Name of	Person	at () Area Code Daytime	: Telephone Number
Enclose	d is a check for the	e 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 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

JOSE MARTI REALTY HOLDINGS, I	LLC	
(Name of the Limited Li (A F	ability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabili	ity Company were filed on 08/09/2016	and assigned
This amendment is submitted to amend the followin	ıg:	
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	
Enter new principal offices address, if applicable	:	<u> </u>
(Principal office address MUST BE A STREET A	DDRESS)	SE TO
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	0	23 PH 3: 53
B. If amending the registered agent and/or r registered agent and/or the new registered office	registered office address on our records, ent address here:	er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
_	, Florida	
	City	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		
MGR	THANASIU, BRIAN J	821 FIFTH AVENUE SOUTH			
		NAPLES, FL 34102	□ Remove		
			□ Change		
MGR	WILES, HOWARD	331 LLOYD ROAD	⊒ Add		
		GEORGETOWN, KY 40324 USA	□ Remove		
			□ Change		
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amendir	ng any other informa	tion, enter d	change(s) here	: (Attach add	ditional sheets,	if necessary)
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n officative <u>te:</u> If the	ate, if other than the date is listed, the date must date inscried in this bl effective date on the D	st be specific an ock does not :	d cannot be prior to meet the applical	ole statutory fi	or more than 90 de	(optional) lys after filing.) hts. this clate v	Pursuant to 605.020 vill not be listed a
record he 90th	specifies a delayed n day after the rec	d effective ord is filed,	date, but not	an effectiv	e time, at 17	2:01 a.m. o	n the earlier o
ed	SEPTEMBER	29	2016	_•			
	How	Signature of a	O. 20	zed representat	live of a member		
				d Wiles			
_			Typext or printed	name of signes	9		

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Filing Fee: \$25.00