L16000167603

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COVER LETTER

TO:

Registration Section
Division of Corporations

	REALTY, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	ROBERTO CRESPO		
		Name of Person	_
	CRESPO REALTY, LLC		
		Firm/Company	_
	3231 AMACA CIR		
		Address	_
	ORLANDO FL 32837		
		City/State and Zip Code	_
	ROBERTO@CRESPOREA		5:E
	E-mail address: (to be used for future annual report notification)	SECTO SECTO SUZU SEL
For further information of	concerning this matter, please c	all:	
ROBERTO CRESPO		786 218-3708 at ()	(*/**]
Name o	of Person	Area Code Daytime Telephone Numb	ner (1)
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
Mailing Address Registration Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite	810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CRESPO REALTY, LLC			
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 09/08/2016	and assigned	
Florida document number L16000167603			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable:	3231 AMACA CIR		
(Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32837		
Enter new mailing address, if applicable:	3231 AMACA CIR		
Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32837		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nam	e of the new registere	
Name of New Registered Agent:		2020 S	
New Registered Office Address:	Enter Florida street address	2	
	, Florida	Zin Code	
	City	zīp Соае 🗀	

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 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	ROBERTO CRESPO PA	4903 TERRA VISTA WAY	
		ORLANDO, FL 32837	\ \exists Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□ Remove
		<u> </u>	25 □Add_p □Remove
			Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□ Change

Signature of a member of authorized representative of a member

Typed or printed name of signee

ROBERTO CRESPO