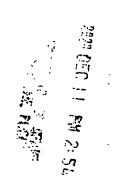
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Certified Copies	Certificates of Status
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

NO REALTY INVESTMENTS	LLC	
Name of Lim	ited Liability Company	
Amendment and fee(s) are sub	mitted for filing.	
ondence concerning this matter	to the following:	
Joseph J. Ferrara, Esq.		
	Name of Person	
Ferrara and Associates		
	Firm/Company	
111 Paterson Avenue		
	Address	
Hoboken, NJ 07030		
	City/State and Zip Code	····
jferrara@academybus.com		·
	·	notification)
oncerning this matter, please ca	all:	
	201 420-7000	0 ext. 2296
f Person	Area Code Da	ytime Telephone Number
ne following amount:		
S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy {additional copy is enclosed
Section	Street Address Registration	Section
•		Corporations
	Amendment and fee(s) are substance concerning this matter Joseph J. Ferrara, Esq. Ferrara and Associates 111 Paterson Avenue Hoboken, NJ 07030 jferrara@academybus.com E-mail address: (concerning this matter, please concerning this matter, please concerning this matter.)	Ferrara and Associates Firm/Company 111 Paterson Avenue Address Hoboken, NJ 07030 City/State and Zip Code jferrara@academybus.com E-mail address: (to be used for future annual report concerning this matter, please call: 201

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BEL SOGNO REALTY INVESTMENTS 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 SEPTEMBER 27, 2016 and assigned Florida document number 1.16000179773 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BEL SOGNO REALTY LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 10295 COLLINS AVENUE Enter new principal offices address, if applicable: **UNIT 802** (Principal office address MUST BE A STREET ADDRESS) BAL HARBOUR, FLORIDA 33154 10295 COLLINS AVENUE Enter new mailing address, if applicable: **UNIT 802** (Mailing address MAY BE A POST OFFICE BOX) BAL HARBOUR FLORIDA, 33154 B. If amending the registered agent and/or registered office address on our records, enter the name of the new regi agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address , Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

Title	Name	Address	Type of Action
		·	□Add
			□Remove
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			🗀 Add
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		14	□Add
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lective date, if other than an effective date is listed, the dat ote: If the date inserted in thi ocument's effective date on th	e must be specific ar s block does not r	na cannot be prior neet the applica	to date of flling o	more than 90 days af	ter filing.) Pursuant to 6	:05.0207 (.ed as the
record specifies a delayed effi is filed.	ective date, but no	эt an effective ti	me, at 12:01 a.n	ı. on the earlier of: (b) The 90th day after	r the
DECEMBER 10		2020				
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Typed or printed name of signee