

L16000199673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

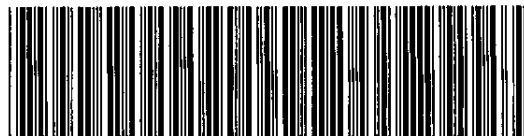
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PHOENIX GROUP REALTY LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDRE ARANCIBIA

Name of Person

PHOENIX GROUP REALTY LLC

Firm/Company

9911 SANDALFOOT BLVD APT 115

Address

BOCA RATON, FL 33428

City/State and Zip Code

andre.arancibia@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDRE ARANCIBIA

Name of Person

561 843-2476
at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	MOHRAN, SARA M	401 SE 14TH CT, UNIT 4	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33316	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ARANCIBIA, ANDRE G	9911 SANDALFOOT BLVD	<input type="checkbox"/> Add
		BOCA RATON, FL 33428	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	WYCHE, CHRIS J	642 NW 5TH AVE	<input type="checkbox"/> Add
		MIAMI, FL 33136	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	WYCHE, CHRISTOPHER J	642 NW 5TH AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33136	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MOBLEY, DWIGHT K.	5525 NW 7TH AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33127	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
	MOBLEY, DWIGHT K.		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

To clarify:

→ changing Andre Arancibia's title, from MGR to AMGR

→ removing Sara Mohran.

→ changing Chris Wyche's name to Christopher Wyche,
and his title, from MGR to AMGR.

→ adding Dwight Mobley as a MGR.

E. Effective date, if other than the date of filing: _____ (optional)

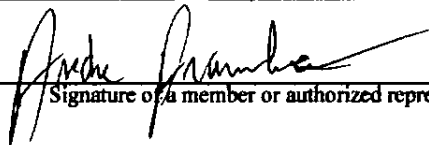
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated NOVEMBER 17TH, 2016



Signature of a member or authorized representative of a member

ANDRE G ARANCIBIA

Typed or printed name of signee

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