L16000221147

(F	Requestor's Name)
	Address)
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((City/State/Zip/Phone #)
PICK-UP	MAIL MAIL
3)	Business Entity Name)
<u>))</u>	Document Number)
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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 345245 4311863

AUTHORIZATION

COST LIMIT : U\$\60.00

ORDER DATE : July 8, 2020

ORDER TIME : 10:53 AM

ORDER NO. : 345245-005

CUSTOMER NO: 4311863

DOMESTIC AMENDMENT FILING

NAME: REALYA INVESTMENTS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

___ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER'S INITIALS:



July 9, 2020

CSC

RESUBMIT

Please give original submission date as file date.

SUBJECT: REALYA INVESTMENTS LLC

Ref. Number: L16000221147

We have received your document for REALYA INVESTMENTS LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker Regulatory Specialist III

Letter Number: 920A00013335

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
	INVESTMENTS LLC		
30D0LC1.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Ivy M. Shapiro		
		Name of Person	
	Blank Rome LLP	Name of Person nk Rome LLP Firm/Company	
		Firm/Company	<u> </u>
	One Logan Square		
		Address	
	Philadelphia, PA 19103		pany S Zip Code Tre annual report notification) 569-5784
		City/State and Zip Code	
	E-mail address: (to be used for future annual rep	ort notification)
For further information c	oncerning this matter, please ca	all:	
Ivy M. Shapiro			784
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Name of Person Blank Rome LLP Firm/Company One Logan Square Address Philadelphia, PA 19103 City/State and Zip Code E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: M. Shapiro at (

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	01		
		252	5. −8 f 3:37
	REALYA INVESTMENTS LLC		3:37
(Name of the Lim	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)	
		U06/2016	
The Articles of Organization for this Limited I	Liability Company were filed on 12		and assigned ·
Florida document number L-16000221147	·		
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited liability company h	ere:	
Realya Development, LLC			
The new name must be distinguishable and contain the	words "Limited Liability Company," the o	lesignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)		
			
Enter new mailing address, if applicable:		_	
<u>Mailing address MAY BE A POST OFFICE</u>	<u> </u>		
B. If amending the registered agent and/or igent and/or the new registered office address		ecords, <u>enter the na</u>	me of the new register
gent and/or the new registered office additi	ess nere.		
Name of New Registered Agent:	Corporation Service Company		
New Registered Office Address:	1201 Hays Street		
ren registered Office reduces.	Enter Flo	rida street address	
	Tallahassee	Florida _	32301
	City	1 10 104 _	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

KADESHA ROBERSON, ASST VICE PRESIDENT

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			
			□Remove
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			□Remove
			Change
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<u>te:</u> If t	date, if other we date is listed, he date inserte 's effective dat	ed in this bloc	k does not i	meet the ap	oplicable sta	of filing or me atutory filing	re than 90 day requiremen	(optional) ys after filing its, this date) 3.) Pursuant to 6 2 will not be 1	605.020 isted as
ecord sp	oecifies a delay	ed effective (date, but no	t an effecti	ve time, at	12:01 a.m. o	n the earlier	of: (b) TI	he 90th day a	fter the
is filed,				2020						
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is filed. Jul	y 6			member of	authorized re	presentative (of a member	 -		

Filing Fee: \$25.00