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COVER LETTER

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TO: , Registration Section Division of Corporations
SUBJECT: TINA I SRUELS ON REAL ESTATE, 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:
FLORENTIXIA ISRAELSON Name of Person
TINA ISRAEUSON REAL ESTATE, LLC FIRM/Company
1009 S. SWEETWATER BLUD.
LONGWOOD, FL 32779 City/State and Zip Code ORLANDOTINAREALTOR & GMAIL, COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
ORLANDOTINAREALTOR & GMAIL, COM E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
TORENTINA ISRAELSON at (407) 444-97/8 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

The Articles of Organization for this Limited Liability Company were filed on ARY 10, 2017 and assigned Florida document number $\angle 1700007569$.

A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	1. LLC	
The new name must be distinguishable and contain the words "Lin	nifed Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		750
(Principal office address MUST BE A STREET ADDI	RESS)	7
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Enter new mailing address, if applicable:		no.
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B. If amending the registered agent and/or registered agent and/or the new registered office add		
B. If amending the registered agent and/or regis		
B. If amending the registered agent and/or registered agent and/or the new registered office add	lress here:	cords, enter the name of the new
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:		cords, enter the name of the new
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:	Enter Florida street	cords, enter the name of the new
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:	lress here:	cords, enter the name of the new

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:

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Filing Fee: \$25.00