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(Re	equestor's Name)			
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(Document Number)				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 6, 2017

ARTURO MESA AM&M REALITY LLC 9120 NW 192 TERRACE HIALEAH, FL 33018

SUBJECT: AM&M REALTY LLC Ref. Number: L17000017148

We have received your document for AM&M REALTY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by cone person acting as an authorized representative.

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) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 717A00002296

COVER LETTER

Division of Co				
SUBJECT: A	1+M PEDITY	LLC		_
	Ŋ	lame of Limited Liability	Company	
Dear Sir or Madam:				
The enclosed Statemen	t of Correction and fee(s) a	re submitted for filing.		
Please return all corres	pondence concerning this n	natter to the following:		
A	RTUIZO MESA Name of Person			
	Name of Person			
A	H+M REALTY Firm/Company	LLC		
	Firm/Company			
	9120 N.W 192	L TERZ		
	Address			
/1	FIALEAH FI 3:	soir.		ant after
	City/State and Zip Code			1
AFT	TORO MESA 12 Co to be used for future annual	YAHOO. COM.		TEB -3
E-mail address: (to be used for future annual	report notification)		
				3
For further information	concerning this matter, ple	ease call:		9 (9)
A,21	TVIZU MESA	at (786)	299 //25 Daytime Telephone Number	
Name	e of Person	Area Code	Daytime Telephone Number	
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ns Circle	Rep Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 32314	
Enclosed is a check for	or the following amount:			
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy	

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. **FIRST**: The name of the limited liability company is: SECOND: ARTICLE ORGANIZATION Document to be corrected is: THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: PERSON. 9120 NW 192 TERR OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transmission of the record was defective. Date Signature of Authorized Representative Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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. Registered Agent's Signature Filing Fee: \$25.00

Certified Copy:

\$30.00 (optional)