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SECRETARISSEE, FLORIDA

S. WARREN JUN 1 3 2017

COVER LETTER

TO:	Registration Sec Division of Corp			
CYID VE		REAL ESTATE OF USA, LLO	C	
SUBJE	CI:	Name of Lim	ited Liability Company	
The end	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspon	ndence concerning this matter	to the following:	
		ERHAN UCAR		
			Name of Person	
			Firm/Company	<u> </u>
		4529 NE 21TH AVE #5		
			Address	
		FORT LAUDERDALE, F		
SUBJEC The enclo Please ret CIHANG Enclosed			City/State and Zip Code	
		ERHANUCAR81@HOTM		
		E-mail address: (to be used for future annual report notific	cation)
For furt	her information co	oncerning this matter, please ca	all:	
CIHAN	GIR KAYA		954 551 6469 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	e following amount:		
2 \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PREMIER REAL ESTATE OF USA, 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 $\frac{05/17/2017}{1}$ and assigned Florida document number L17000109452 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered 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 accument 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

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>	Address	Type of Action
MGR	GULDEN DAI	4529 NE 21ST AVE #5	Add
		FORT LAUDERDALE, FL 33308	☐ Remove
			☐ Change
MGR	GULSUM GURLEVUK	4529 NE 21ST AVE #5	
		FORT LAUDERDALE, FL 33308	☐ Remove
			☐ Change
MGR	GULBIN EREN	4529 NE 21ST AVE #5	Add
		FORT LAUDERDALE, FL 33308	□ Remove
			☐ Change
			🗖 Add
		,	□ Remove
			Change
			
			□ Remove
		<u> </u>	ALCO Change
		_	ASSEE, FLORIDA
			ATE Change

amending a	ny other information, enter change(s) here: (Attach additional sheets, if necess	sary.)	
,	,		
			
			
			
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ote: If the dat ocument's effe e record spe	if other than the date of filing: is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after file inserted in this block does not meet the applicable statutory filing requirements, this dective date on the Department of State's records. ecifies a delayed effective date, but not an effective time, at 12:01 a.r ay after the record is filed.	ate will not b	e listed
ated	2017		
	Signature of a member or authorized representative of a member		·
	Signature of a member or authorized representative of a member		17 JI
ERH	IAN UCAR Typed or printed name of signee		שווא אב
	t yped or printed name of signee	SEE,	2 PM
	Page 3 of 3	FLOG	
	Filing Fee: \$25.00	TATE	-

Filing Fee: \$25.00