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COVER LETTER

Division of Corporations
SUBJECT: BERKMAN REAL ESTATE DEVELOPEMENT LUI
The enclosed Articles of Amendment and fec(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Audra Simonth Esq.
Law office of Audra Simontch PA
1200 N Federal Highway Sut200
Boca Raton FLA. 33432. City/State and Zip Code
E-mail address: (to be used for inture annual report notification)
For further information concerning this matter, please call:
Audra Simovitch Esq at (501) 901 - 9926 Name of Person Name of Person Name of Person Name of Person
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$55.00 Filing Fee & Certificate of Status \$\Bigcup \\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BERKMAN (Name of the Limited I	PEAL ESTATE DEVELOPMENT LLC Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabi	
This amendment is submitted to amend the followi	ng:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	(DDRESS)
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BO</u>	<u>X</u>)
registered agent and/or the new registered office	registered office address on our records, enter the pame of the new e address here:
Name of New Registered Agent:	
New Registered Office Address:	77 O 150
	Enter Florida street address , Florida
-	City 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

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 Title Name **Address** Type of Action MLR Audra Simovitch 370 Camino Gardons Blud DAdd Site 110 Remove Buca Ration, FC. 33132 Change MGR Tunc Berkman 370 Camina bardeno Blud Wadd Suite 110 Remove Boca Raton, FL. 33132 Change ☐ Add □ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change

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