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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
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J. HARRIE

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE		AYHILL DUMOTT REALTY	, LLC	
30041		Name of Lin	nited Liability Company	·
		Amendment and fee(s) are sub	-	
		WENDY MENDOZA		
			Name of Person	
		CAYHILL DUMOTT RE	ALTY, LLC	
			Firm/Company	<u> </u>
		815 NORTHEAST 70 ST	REET	
			Address	
		MIAMI, FLORIDA 331	38	
		wendy@wendymendoza.co	City/State and Zip Code	
		E-mail address: (to be used for future annual repo	rt notification)
For furti	her information co	oncerning this matter, please c	all:	
WEND	Y MENDOZA		305 318-85	57
	Name of	Person	305 318-85 at () Area Code D	aytime Telephone Number
Enclosed	d is a check for th	e following amount:		
\$ 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)
	MAILI	NG ADDRESS:	STREET/CO	DURIER ADDRESS:

MAILING 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 OF

CAYHILL DUMOTT REALTY, LLC	
(<u>Name of the Limited Liability Company as i</u> (A Florida Limited Liabilit	t now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were	filed on JUNE 13, 2017 and assigned
Florida document number L17000129307	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability c	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Con-	npany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	IAS 28
<u> </u>	<u> </u>
	第2 月
Enter new mailing address, if applicable:	Sign 3
(Mailing address MAY BE A POST OFFICE BOX)	
	CO C. Transport
	5,: 2
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	ddress on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
C	tr Zin Covla

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	<u>Name</u>	Address	Type of Action
MGR	AMPARO MUNOZ	6820 INDIAN CREEK DR. #1-C	
		MIAMI BEACH, FL 33141	■ Remove
			☐ Change
			🗖 Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			☐ Change
			Add
			☐ Remove
			Change
			D Remove
			OD Change
			Control of the contro
			Renfie e
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necess	ary.)		
			
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C. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filin Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. b) The 90th day after the record is filed.	e will not be li	sted as (the
Dated JULY 7 2017			
Signature of a member or authorized representative of a member	<u> </u>	201	
WENDY MENDOZA, MANAGING MEMBER	TAKU.	2017 JUL	7
Typed or printed name of signee	ASSEE ASSEE	သ	
Page 3 of 3	OF SI	PH -	<u>;,,,</u>
Filing Fee: \$25.00	25 A C C A C A C C A C C A C A C C A	1:21	مبيوك