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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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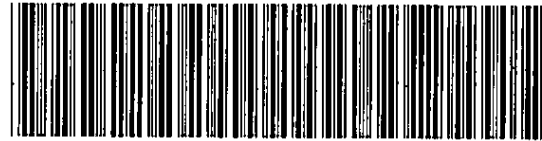
(Business Entity Name)

(Document Number)

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SEP 17 2019

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SEP 17 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Premier Realty & Property Management 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:

Joanne Rivera
Name of Person

Premier Realty & Property Management LLC
Firm/Company

~~20309 13th Ave~~ 18135 CANAL Pointe St.
Address

Tampa, FL 33647
City/State and Zip Code

Rivera Jo Rivera 2710@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joanne Rivera at (908) 487-3243
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

Premier Realty & Property Management 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 7/24/17 and assigned Florida document number 17000157466

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)

20309 Bruce B. Downs Blvd.
Tampa, FL 33647

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

20309 Bruce B. Downs Blvd.
Tampa, FL 33647

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:

Joanne Rivera

New Registered Office Address:

20309 Bruce B. Downs Blvd.
Enter Florida street address

Tampa, Florida 33647
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Joane Rivera	20309 Bruce B. Downs Blvd.	<input checked="" type="checkbox"/> Add
		Tampa, FL 33647	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Omar Rivera	20309 Bruce B. Downs Blvd.	<input checked="" type="checkbox"/> Add
		Tampa, FL 33647	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Christian Lopez	20309 Bruce B. Downs Blvd.	<input checked="" type="checkbox"/> Add
		Tampa, FL 33647	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(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 filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member or authorized representative

Joanne Rivera

Typed or printed name of signee