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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Registration S Division of C	Corporations			
SUBJECT: ROM	neo Real Es	STATE MANAG	ement Company	2, LLC
SOBBLET. C		Name of Limited Liabilit		
Dear Sir or Madam:				
The enclosed Statemen	nt of Correction and fee(s) a	are submitted for filing.		
Please return all corres	spondence concerning this t	natter to the following:		
CARO	LINA ROME	? ა		
	Name of Person			
	Firm/Company			
6705	RCD POAD SU	17e 700		
CORAL	GABLES, FL	33143		
· ·	City/State and Zip Code			
CAROLIN	IN @ CHARTER	America.	(0M	
E-mail address: ((to be used for future annua	report notification)		
For further information	n concerning this matter. ple	ease call:		
CAROLINI	A Romeo	at (305)	740-3252	9
Nam	e of Person	Area Code	Daytime Telephone Number	
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ons r Circle	Re D P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314	
Enclosed is a check for	or the following amount:			
S25 Filing Fee	S30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	S60 Filing Fee. Certificate of Status & Certified Copy	
CR2E062 (9/15)				

STATEMENT OF CORRECTION FOR FLÖRIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuar	nt to section 605.0209, F.S., this docum	nent is being submitted to correct a previously filed document.
FIRST	The name of the limited liability com:	pany is: Romed Real Estate MANAgement
	Company 2,	
SECO:	ND: The Florida Document number	per of the limited liability company is: \(\(\mu\) 170001783)2
THIRD	2: Document to be corrected is	ARTICLES OF ORGANIZATION
	(CHECK THE APPROPRIA	TE BOX AND COMPLETE THE APPLICABLE STATEMENT
4	statement are as follows:	incorrect statement, the reason the statement is incorrect, and the corrected
	Name of LL	C Should have been
	ACR Realty	C Should have been
	<u>OR</u>	
	Was defectively signed. The manner as follows:	in which the document was defectively signed and the appropriate correction are
	<u>OR</u>	
	The electronic transmission of the rec	ord was defective. 8/23/17 Date
	Signature of Authorized Re	presentative Date
Signatur acceptin	e of new registered agent, if applicable g the designation).	NOTE: if correcting the registered agent, the new registered agent must sign
New Re	gistered Agent's Signature, if changing	Registered Agent:
orovisio. Obligație	ns of all statutes relative to the proper ons of my position as registered agent change in the registered office addres	agent and agree to act in this capacity. I further agree to comply with the and complete performance of my duties, and I am familiar with and accept the as provided for in Chapter 605, F.S. Or, if this document is being filed to merely s. I hereby confirm that the limited liability company has been notified in writing
		Registered Agent's Signature
	- Cert	Filing Fee: \$25.00