Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Го:				
	Division of Corporations Fax Number : (850)617-6383			
	Tax Hombel			
From:	Account Name : RC TAX SERVICE LLC			
	Account Number : 120140000083			
	Phone : (407)932-0040			
	Fax Number : (407)520-5473			
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Corporate Filing Menu

Help



November 30, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

ELITE REALTY LLC 809 WAKEFIELD WAY KISSIMMEE, FL 34758US

SUBJECT: ELITE REALTY LLC

REF: L17000189455

We received your electronically transmitted document. Eowever, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

This document was previously filed on November 20, 2020.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6050.

Susan Tallent Regulatory Specialist II Letter Number: 420A00023813

Dear Ms. Susan Tallent,

I am writing to you and this department to address the amendment sent on the 24th of November. I would like to state that the most recently filed amendment was not an error since I would like my company to appear as follows: ELITE REALTY, LLC

Instead of how it currently appears as: ELITE REALTY LLC

The change is the comma between realty and LLC. Please file the amendment sent on the 24th. Thank you.

I am also re-sending the amendment in this reply.

· COVER LETTER

TO: Registration S Division of Co		,	
ELITE RE	ALTY, LLC		
SUBJECT:		ed Liability Company	•
The enclosed Articles of	f Amendment and fec(s) are subm	nitted for filing.	,
Please return all corresp	sondence concerning this matter to	o the following:	
	ROSELIN ROSARIO		
		Name of Person	
	ELITE REALTY,LLC		
		Firm/Company	
	3179 Santa Cruz Drive		
		Address	
	KISSIMMEE, FL 34746		
		City/State and Zip Code	
	ROSARIOROSELIN@GM	AIL.COM	
		to be used for future annual report no	hicanon)
For further informatio	n concerning this matter, please of	all:	
ROSELIN ROSARIO		407 5729936 at ()	
Nam	e of Person	Area Code Dayti	me Telephone Number
Enclosed is a check fo	r the following amount:		
■ \$25.00 Filing Fee	S30.00 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)
P.O. Box	on Section f Corporations		orporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELITE REALTY LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records. Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 09/06/2017	and assigned	
Florida document number L17000189455			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
ELITE REALTY, LLC		15 miletion PT 1 C "	
The new name must be distinguishable and contain the words "Limited Liab	offity Company," the designation "LLC" or the a	ibbreviation L.D.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	e address on our records, enter the na	me of the feet reg	istere
B. If amending the registered agent and/or registered office address here:	e address on our vices as,	108.17 108.17 108.17 108.17	71
Name of New Registered Agent:		752 <u>P</u> !	
-			ĹĮ.
New Registered Office Address:	Enter Florida street address	ည္ဆို တ္	
	Florida	07 107	
	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 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>	Name	Address	Type of Action
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			□Remove
			Change
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D. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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F. Effective	e date, if other than the date of filing:	
arm effect	tive date is listed, the date must be specific and comes be quier to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(5)	
Note: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be used as the	
documen	n's effective date on the Department of State's records:	
• •		
If the record s	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		
,		
Dated	November 24. 2020_	
TVRIEG	The state of the s	
	Signature of a member or authorized representative of a member	
•	ROSHLIN ROSARIO	
	Typed or printed name of styrice	. ;.
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