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COVER LETTER

TO:	Registration Se Division of Cor			
CHDIE	Realty Exe	cutives of Soputh Florida, LLC		
SUBJE	C1:	Name of Lin	nited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Ricardo Pires		
			Name of Person	
		Realty Executives of Sout	h Florida, LLC	
			Firm/Company	
		2751 East Oakland Park B	lvd	
			Address	
		Fort Lauderdale, FL 33300	5	
			City/State and Zip Code	
		ricardo.pires@realtyexecuti		
			to be used for future annual report notifi	cation)
For furth	er information c	oncerning this matter, please c	all:	
Ricardo	Pires		at () 305 343-2516 Area Code Daytime	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	l is a check for th	e following amount:		
\$2 5.0	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)

MAILING ADDRESS:

TO:

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

Realty Executives of South Florida, 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 09/20/2017 Florida document number L17000195471 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: REXSFL Realty, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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: New Registered Office Address: Enter Florida street address City

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>	Type of Action				
							
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fective date, if other than effective date is listed, the ote; If the date inserted in accument's effective date of	n this block does i	not meet the applic	able statutory film	(option ore than 90 days after the grequirements, this	nal) iling.) Pursuant to 605.0 date will not be listed	207 (3 as th
record specifies a d The 90th day after t	elayed effection he record is fil	ve date, but no led.	ot an effective t	ime, at 12:01 a	.m. on the earlier	of:
ated		2017				
	Signature	of a member or auth		of a member		

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Filing Fee: \$25.00