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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

Registration Section
Division of Corporations

TO:

	rican Realty & Investment Group	PLLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Anthony DeRosa		
	All American Realty & In-	Name of Person vestment Group PLLC	
		Firm/Company	
	144 Mary Esther Blvd Suit	te 7	
	Fort Walton Beach FL 325	Address	
	tony@usrealty.us E-mail address: (City/State and Zip Code to be used for future annual report no	tification)
For further informatio	n concerning this matter, please c	all:	
Anthony DeRosa		850 240-0128	
Nam	e of Person		me Telephone Number
Enclosed is a check fo	r the 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)
Reg Divi P.O	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, FL 32314	STREET/COUR Registration Sect Division of Corp Clifton Building 2661 Executive C	orations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

All American Realty & Investment Group PLLC (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 ______ and assigned Florida document number 1.17000222875 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 "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: بب Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Rodney Dean Henson	5341 NW 79th Avenue Doral FL 33166	
			□ Remove
			□ Change
AMBR	Anthony DeRosa	1910 Kadima Cirlce Fort Walton Beach FL 32547	
			Remove
			🗀 Change
AP	Stacie DeRosa	1910 Kadima Circle Fort Walton Beach FL 32547	Add
			☐ Remove
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ote: If the date inserted in	date must be specific and cannot be prior to date of a this block does not meet the applicable statuent the Department of State's records.	tiling or more than 90 days af	tional) ter (Iling.) Pursuant to 605.0 his date will not be listed
record specifies a d The 90th day after t	elayed effective date, but not an eff he record is filed.	ective time, at 12:01	. a.m. on the earlier
ated			
	Signature of a member or authorized repr		

Page 3 of 3

Filing Fee: \$25.00