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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.

Account Number : I20010000025 : (786)899-2235 Phone : (305)935-9042 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: kleopold@leopoldkom.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CARLINGTON REALTY, LLC

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Hallin 26 2019

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	INGTON REALTY, LLC ty Company as it now appears on our reco a Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability C Florida document number L17000224771	Company were filed on 10/30/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		201
(Principal office address MUST BE A STREET ADDR	SEZZ)	<u> </u>
Enter new melling address if applicables		5 PR
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
internet marress next be at 1004 G11160 A G15		. 55
B. If amending the registered agent and/or registered agent and/or the new registered office add		rds, enter the name of the new
Name of New Registered Agent:	•	
New Registered Office Address:	Enter Florida street ada	iress
<del></del>		Florida
	City	zφ coαz

## 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

Title	<u>Name</u>	Address	Type of Action
P	Aaron Jordan	500 NW 2ND AVENUE SUITE 11335	□ Add
		MIAMI, FL 33101	
			Remove
			Change
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fective date, if other than the date of filing:  n effective date is listed, the date must be specific and cannot be prior to other. If the date inserted in this block does not meet the applicable current's effective date on the Department of State's records.	(optional)  ate of filing or more than 90 days after filing.) Pursuant a statutory filing requirements, this date will not be	 ත 605.020 e listed a:
record specifies a delayed effective date, but not a The 90th day after the record is filed.	n effective time, at 12:01 a.m. on the $\epsilon$	earlier o
June 20 \ 2019		
June Trunce	ed representative of a member	_

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Filing Fee: \$25.00