

# L 17000227730

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

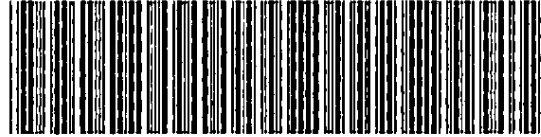
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11/07/22--01029--024 \*\*35.00

2022 NOV -7 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

Registration Section  
Division of Corporations

T: GRALTA REALTY LLC  
Name of Limited Liability Company

Used Articles of Amendment and fee(s) are submitted for filing.

Turn all correspondence concerning this matter to the following:

CESAR CUNHA  
Name of Person  
GRALTA REALTY LLC  
Firm/Company  
121 S ORANGE AVENUE SUITE 1500  
Address  
ORLANDO FL 32801  
City/State and Zip Code  
CESAR@GRALTAREALTY.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CUNHA at (321) 297-8465  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$5.00 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:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**TO  
ARTICLES OF ORGANIZATION  
OF**

GRALTA REALTY LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 11/03/2017 and assigned  
document number L17000227730.

Amendment is submitted to amend the following:

**Changing name, enter the new name of the limited liability company here:**

Name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Principal office address, if applicable:**

**Principal office address MUST BE A STREET ADDRESS**

**Mailing address, if applicable:**

**Mailing address MAY BE A POST OFFICE BOX**

**Changing 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*

, **Florida**

City

Zip Code

**Registered Agent's Signature, if changing Registered Agent:**

*I 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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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**

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TALLAHASSEE FL

**Manager**  
**Authorized Member**

### Type of Action

121 S ORANGE AVENUE SUIT 1500

■ Add

ORLANDO FL 3201

☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change

ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

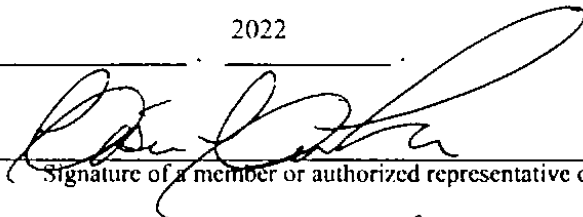
Effective date, if other than the date of filing: NOV 5 2022 (optional)

If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the member's effective date on the Department of State's records.

If the filing 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 filing is filed.

NOVEMBER 3

2022



Signature of a member or authorized representative of a member

Cesar Cunha

Typed or printed name of signee

Filing Fee: \$25.00