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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KIM MARKS CPA ---

Account Number : I20120000072

: (305)895-5815

Fax Number

: (305)895-6273

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

Email	Address	·	 	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN THE AGENCY REAL ESTATE FIRM, LLC

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COVER LETTER

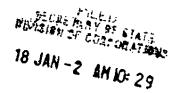
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TO:	Registration Se Division of Corp						
CHAIR TY		ICY REAL ESTATE FIRM LI	LC				
Name of Limited Liability Company							
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	retum all correspo	ndence concerning this matter	to the following:				
		YARIN DORI					
			Name of Person				
		THE AGENCY REAL ES	TATE FIRM LLC 🕝				
			Firm/Company				
		327 W 47TH ST					
			Address				
		MIAMI BEACH, FL 3314	0				
			City/State and Zip Code				
	DORIYARIN@GMAIL.COM E-mail address: (to be used for future annual report notification)						
For fur	ther information c	e-mail address: (·	neadony			
YORA	M DORI		305 528-1246 at ()				
	Name o	f Person	Area Code Daytim	e Telephone Number			
Enclose	ed is a check for th	ne following amount:	·				
\$2:	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy in 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 Tallahassec, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifter Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



THE AGENCY REAL ESTATE FIRM LLC	٠.	_	
(Name of the Limited Liability Com (A Florida Limite	npatty as it row appears on our ed Liability Company)	records,)	
The Articles of Organization for this Limited Liability Compa Florida document number L17000258129	ny were filed on 12/19/2017	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation	a "LLC" or the abbreviation "L.L.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)			
	, 3 Alan		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address b	office address on our r	ecords, <u>enter the name of the new</u>	
Name of New Registered Agent:	:		
New Registered Office Address:	,		
	Enter Florida street address		
	City	, Florida 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 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>	Address	Type of Action
MGR	YARIN DORI	920 W 47TH ST	= Add
		MIAMI BEACH, FL 33140	☐ Remove
			Change
		·	D Add
		<u> </u>	□ Remove
		- 1/2	Charge Add 3
			Demoral Control of the Control of th
			□ Всіноус
			Change
			Add
			☐ Remove
			□ Change
			☐ Add
			□ Remove

Page 3 of 3

40RAM DORI

Filing Fee: \$25.00

Typed or printed name of signee