# TT000261077

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### . COVER LETTER

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	egistration Se ivision of Co			·	
SUBJECT	CUTTING	EDGE REAL ESTATE SOLU	JTIONS LLC		
	·	Name of Lin	nited Liability Company		
			•		
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retu	m all correspo	ondence concerning this matter	to the following:		
		JOE G. GARCES		·	
		CUTTING EDGE REAL 1	Name of Person ESTATE SOLUTIONS L	LC	_
			Firm/Company		_
· . :		4481 SW 3RD STREET	This company		2019 SEP
		*** <u>***</u> ****	Address		- · · · · · · · · · · · · · · · · · · ·
·•		CORAL GABLES, FL 33	134		
		flippinghouses7@yahoo.com	City/State and Zip Code m		AH 10: 3:
			to be used for future annual i	report notification)	37
ror turther	information c	oncerning this matter, please ca	all:		
JOE G. GA	RCES		707 766 at ( )	-4846	
	Name o	f P <del>ers</del> on	Area Code	Daytime Telephone Number	<u> </u>
Enclosed is	a check for th	ne following amount:			
<b>□ \$</b> 25.00	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certifications Certified	ate of Status &
	Registr Divisio	ING ADDRESS: ation Section on of Corporations	Registrati Division	COURIER ADDRESS: on Section of Corporations	
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2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

# CUTTING EDGE REAL ESTATE SOLUTIONS 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 DEC 22, 2017 and assigned Florida document number L17000261077 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 "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) 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: ii.t. . . . Enter Florida street address

## New Registered Agent's Signature, if changing Registered Agent:

U ...

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

, Florida

## or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Ruth M. Garces	4496 SW 1st Street	
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		Coral Gables, Florida 33134	
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