

L17000261922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

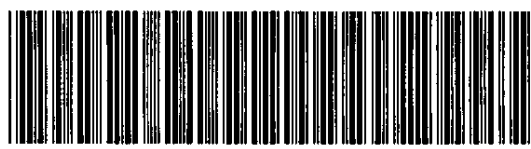
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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L17-261922

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2018 APR 20 PM 2:00

N. CAUSSEAUX

APR 23 2018

L17-261922

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Foundry Realty Group, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mat Simmons
Name of Person

The Foundry
Firm/Company

2114 W Grove Dr
Address

Gibsonia PA 15044
City/State and Zip Code

mat@thefoundryre.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mat Simmons at **(412) 951-5295**
Name of Person Area Code & Daytime Telephone Number

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

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 10, 2018

MAT SIMMONS
THE FOUNDRY
2114 W. GROVE DRIVE
GIBSONIA, PA 15044

SUBJECT: THE FOUNDRY REALTY GROUP, LLC
Ref. Number: L17000261922

We have received your document for THE FOUNDRY REALTY GROUP, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

We are enclosing the proper form(s) with instructions for your convenience.

The form completed was a Limited Partnership not an LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 018A00007157

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

THE FOUNDRY REALTY GROUP 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 12/20/17 and assigned Florida document number L17000261922

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)

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DIVISION OF CORPORATE REGISTRATION
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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: _____

Enter Florida street address

_____, Florida _____
City 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>	<u>Address</u>	<u>Type of Action</u>
MGR	KYUSE AGLES	1510 BARCELONA	<input checked="" type="checkbox"/> Add
		FT MYERS FL 33901	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JANE KSLIN	9891 S. MIRALAGO	<input type="checkbox"/> Add
		PARKLAND FL 33076	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DIEGO CERTUACHE	6671 VIA REGINA	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33433	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Multiple horizontal lines for amending information.

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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

If the record 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 record is filed.

Dated April 16, 2018

Signature of a member or authorized representative of a member

SARAH SIMMONS
Typed or printed name of signee