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D. SCOTT FEB 1 5 2013

COVER LETTER

	gistration Sec vision of Corp				
SUBJECT:		REALTY LLC			
SUBJECT		Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub	-		
riease ieuu	ii aii correspo	Carole GARDONCINI	to the following.		
			Name of Person		
		The Nice Realty LLC			
			Firm/Company		
		1490 W 49th Pl Suite 411	•		
			Address		
		HIALEAH, FL 33012			
			City/State and Zip Code	,	
		gardoncinicarole@hotmail.		-4:	
			to be used for future annual report notific	ation)	
For further	information co	oncerning this matter, please c	all:		
Carole Gar	doncini		305 4694730 at ()	700 200 1	Ì
	Name of	f Person	Area Code Daytime	Telephone Number 17 17 17 17 17 17 17 17 17 17 17 17 17	: []
Enclosed is	a check for th	e following amount:		TO T	ا امسر امس
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE NICE REALTY 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 01/09/2018 and assigned Florida document number L18000006432 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." 1490 W 49th PI Suite 411 Enter new principal offices address, if applicable: Hialeah, FL 33012 (Principal office address MUST BE A STREET ADDRESS) 1490 W 49th Pl Suite 411 Enter new mailing address, if applicable: Hialeah, FL 33012 (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: Carole GARDONCINI Name of New Registered Agent: 1575 West Avenue Apt 8 New Registered Office Address: Enter Florida street address Florida 33139, MIAMI BEACH City

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.

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

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	CAROLE GARDONCINI	1575 West Avenue Apt 8	= Add
		Miami Beach, Fl 33139	□ Remove
			☐ Change
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n effective date is listed, the date must bete: If the date inserted in this block	e specific and k does not m	cannot be prior to neet the applicab	date of filing or mole statutory filing	re than 90 days and requirements, th	is date will not be	listed a
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record specifies a delayed		late, but not	an effective ti	me, at 12:01	a.m. on the e	arlier
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Filing Fee: \$25.00