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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

| TO: Registration of | | | |
|-------------------------|---|---|--|
| SUBJECT: | 4% Listing Realty LLC | | |
| | Name of Lin | nited Liability Company | |
| The enclosed Article | s of Amendment and fec(s) are sub | omitted for filing. | |
| Please return all corr | espondence concerning this matter | to the following: | |
| | Division of Corporations 4% Listing Realty LLC Name of Limited Liability Company osed Articles of Amendment and fee(s) are submitted for filing. eturn all correspondence concerning this matter to the following: Souzi Tatarian Name of Person 4% Listing Realty LLC Firm/Company 1025 SW Martin Downs Blvd., Suite 101, Address Palm City, Fl. 34990 City/State and Zip Code 4percentlistingrealty@gmail.com E-mail address: (to be used for future annual report notification) et information concerning this matter, please call: | | |
| | | Name of Person | |
| | 4% Listing Realty | LLC | |
| | | Name of Limited Liability Company and fee(s) are submitted for filing. erning this matter to the following: Souzi Tatarian Name of Person Listing Realty LLC Firm/Company W Martin Downs Blvd., Suite 101, Address City, Fl. 34990 City/State and Zip Code Intlistingrealty@gmail.com E-mail address: (to be used for future annual report notification) s matter, please call: at (772) Area Code 1 \$55.00 Filing Fee & \$60.00 Filing Fee. | |
| | 1025 SW Martin Dov | vns Blvd., Suite 101, | |
| | Was 10 th a 610 of 1975 - 1 | Address | |
| | Palm City, Fl. 34990 | | · · · · · · · · · · · · · · · · · · · |
| | 4 | • | |
| | E-mail address: (| @gmail.com to be used for future annual report notifi | cation) |
| For further information | on concerning this matter, please co | all: | |
| | TATARIAN | at (772) 9/9 - | 1815 |
| Nai | ne of Person | Area Code Daytime | Telephone Number |
| Enclosed is a check f | or the following amount: | | |
| 3 \$25.00 Filing Fee | © \$30.00 Filing Fee & Certificate of Status | Certified Copy | Certificate of Status & Certified Copy |

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

| 4% Listing Realty LLC (Name of the Limited Liability (A Florida L | Company as it now appears on our records.) imited Liability Company) | | |
|--|--|--------------------------|------|
| The Articles of Organization for this Limited Liability Cor Florida document number <u>L18000014185</u> | mpany were filed on <u>January 16, 2018</u> | and assigned | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limite | d liability company here: | | |
| The new name must be distinguishable and contain the words "Limited | d Liability Company." the designation "LLC" or the abl | previation "L.L.C." | |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADDRE | <u>(SS)</u> | | |
| | | ਛ | SE |
| | | A | -CR |
| Enter new mailing address, if applicable: | | 30 | Æ |
| (Mailing address MAY BE A POST OFFICE BOX) | | 3 L | 10 |
| | | 5 , - | S |
| B. If amending the registered agent and/or register registered agent and/or the new registered office addres | red office address on our records, <u>enter</u> ss here: | = 5 | AIEW |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter Florida street address | | |
| | , Florida | - American de la Company | |
| | 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

Title Name **Address Type of Action** RAFFI SARIBOYASIAN 1025 SW MARTIN DOWNS BUDY Add AMBR Suik 101 , Palm City, FL 34990 Remove _____ □ Change SOUZI TATARIAN MGR 1025 SW MARTIN DOWNS BLUD A Add Suite 101, PALM City, FL 34990 Remove _□ Change ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove _□ Change □ Add □ Remove

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| | ord specifies a 90th day after | | | ot an effectiv | ve time, at 12 | ::01 a.m. on the | earlier of: |
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