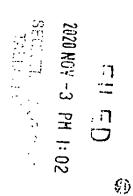
# L18000033866

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12/11/20

## **COVER LETTER**

TO:	Registration Section
	Division of Corporatio
	SIGNATURE
CHID II	DOT.

# E VISION REAL ESTATE, LLC

SUBJECT:			
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Kristen King Jaiven, Esq.		
	SIGNATURE VIS	Name of Person SION REAL ESTATE, LLC	
	<del></del>	Firm/Company	
	6699 North Federal High	vay; Suite 103	
	Boca Raton, FL 334	Address 187	<del></del>
	kristen@quadcompanies.cc	City/State and Zip Code	
	E-mail address: (	to be used for future annual report notification)	<u> </u>
For further information co	oncerning this matter, please c	all:	
Kristen King Jaiven, Esq	-	561 300-6921	
Name of	Person	at ()	one Number
Enclosed is a check for th	e following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

# Mailing Address:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## SIGNATURE VISION REAL ESTATE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

1/4	riorida Liniited i	January Company)			
The Articles of Organization for this Limited Liab	_ and assigned				
Florida document number L18000033866	·				
This amendment is submitted to amend the following	ing:				
A. If amending name, enter the new name of th	e limited liabi	ility company here:			
The new name must be distinguishable and contain the word	s "Limited Liabil	ity Company," the designation "LL	C" or the abbrev	iation "L.I	C."
Enter new principal offices address, if applicable	e:	-		<b>_</b>	
(Principal office address MUST BE A STREET A		<u> </u>	207		
			<u> 22</u>	Z.	
Enter new mailing address, if applicable:		6699 North Federal Hi	ghway 📜	)¥ -3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Mailing address MAY BE A POST OFFICE BO	<b>(X</b> )	Suite 103	7		<del>:                                     </del>
The state of the s	<u> </u>	Boca Raton, FL 33487	· · · · · · · · · · · · · · · · · · ·	- <del>-</del> -	
B. If amending the registered agent and/or regi agent and/or the new registered office address h	stered office a ere:	ddress on our records, <u>enter</u>	r the name of	∾ the new	્રિફે registerec
Name of New Registered Agent:	lack Jaiven	No Change			
New Registered Office Address:	6699 North Fed	eral Highway: Suite 103			
		Enter Florido street addre	SS	_	
	Boca Raton	, F	33487 lorida		
_		Cuy	- 7	ip 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 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	Jack Jaiven	6699 North Federal Highway; Suite 103	
		Boca Raton, FL 33487	□Add
		6699 North Federal Highway; Suite 103	□Remove
			<b>½</b> Change
MGR 	Ben Schachter	Boca Raton, FL 33487	□Add
			_ □Remove
			_
<del></del>			□Add
			□Remove
			_ □Change
	<del></del>		□Add
		···	_ □Remove
			□Change
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			Change