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MAR 21 2018

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Ĭ	Division of Corporatio	hs
.	E Realty Group LL	
SUE	JECT:	Name of Limited Liability Company
The	enclosed Articles of Amenda	nent and fee(s) are submitted for filing.
Pica	se return all correspondence	concerning this matter to the following:
	Mic	nael Holt
		Name of Person
	ER	ealty Group LLC
		Firm/Company
	401	E 34th Street #S19C
		Address
	Nev	York.NY 10016
		City/State and Zip Code calestate@gmail.com
		E-mail address: (to be used for future annual report notification)
Fo	urther information concerning	g this matter, please call:
Mic	l Pael Flolt	917 407-0287
	Name of Person	Area Code Daytime Telephone Number
Enc.	psed is a check for the follow	ting amount:
		Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)
	MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, FI	ction Registration Section porations Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	E Realty Group I	μ.ς			
-		Name of the Limited (A	Liability Company as it now appears on our records.) A Florida Limited Liability Company)		
١			2/22/18		
∦	Articles of Organization for	r this Limited Liab	bility Company were filed on	and assig	gned
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I	amendment is submitted t		ving.		
l			•		
ļ	f amending name, <u>enter</u>	he new name of t	he limited liability company here:		
					
١	ew name must be distinguishab	e and contain the wor	rds "Limited Liability Company," the designation "LLC" or the a	ibbreviation "L.L.	.C,"
4	r new principal offices a	ddress, if applicat	ble:		
4	ncipal office address MUS	T BE A STREET	ADDRESS)		<u> </u>
				<u>;</u> _	L S
				!	E E
E	r new mailing address, i	 f applicable:			SE SE
4	ling address MAY BE A	POST OFFICE BO	OX)	•	三
					9.0 0.2 0.2
				***	DE A
			r registered office address on our records, enter	the name o	
i	tered agent and/or the n	ew registered offic	ce address here:	HAR	LCR CR
-					
				5 0	HAE TA
	Name of New Regist	cred Agent:		IR 20	ETARY
	5			IR 20 AM	HASSEE, F
	Name of New Regist		F.nter Florida street address	20 AM 1:	HASSEE, FLOR
	5		Fnter Florida street address Florida	20 AM	HASSEE, FLORIDA
	5			20 AM 1:	HASSEE, FLORIDA

] amendir∉	Authorized Person(s) author	rized to manage, <u>enter the title, name, and ad</u>	dress of each person being ad
 GR= M			
<u>tle</u>	<u>Name</u>	<u>Address</u>	Type of Action
GR	Michael Holt	1736 SE 47th Ave	
		Ocala,FL 34471	□ Remove
			Change
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1			Change

Page 2 of 3

	Typed or printed name of signee	1 02
Michael Holt		3
	Signature of a member or authorized representative of a member	AR 20
ated		18 HAR
The 90th day after the March 15th	yed effective date, but not an effective time, at 12:01 a record is filed.	a.m. on the earli
	e Department of State's records.	
ote: If the date inserted in th	must be specific and cannot be prior to date of filing or more than 90 days after is block does not meet the applicable statutory filing requirements, this	filing.) Pursuant to 60:
Santing deat if eathers at	Abo dota of Citimon	
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