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COVER LETTER

SUBJECT: Think Real Estate LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Zacarios Sancher Name of Person
Think Real Estate Firm/Company
11525 Hutchiso. Blud Suite 102
Address
Paname City Plack Pt 13407 City/State and Zip Code ZSanchez 92 Qgmail.com E-mail address: to be used for future annual report notification)
Cify/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
7 10 ()
Lack Sanchez at (150) 890-6262 Name of Person Area Code Daytime Telephone Number
Name of reason Atea Code Daytine reiephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee.
Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed: Certified Copy Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

Think Real (Name of the Limited Liability Comp	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L/JOOO 106069</u> .	y were filed on 4-27-18 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	bility company here:
The new name must be distinguishable and contain the words "Limited Liab	ality Company," the designation "L.L.C" or the abbreviation "L.L.C,"
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	11525 Hutchisa - Aut Suite 102 - Bin Panan City Rend SEC JZ907
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	office address on our records, enter the name of the new
Name of New Registered Agent:	रण
New Registered Office Address:	Enter Florida street address
	Florida
	City Zio 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 _□ Add _□ Remove ☐ Change □ Add _□ Remove _ Change DbA 🗖 8 □ Remove Add On One _ Change □ Remove _□ Change □ Add □ Remove

_□ Change

. If amending any other information, enter change(s) here: (Attach additional sheets,	if necessary.)	
		
	 	
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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 day Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	vs after filing.) Pursuant to 605.0	207 (3) Las the
the record specifies a delayed effective date, but not an effective time, at 12. The 90th day after the record is filed.	:01 a.m. on the earlier	of:
Dated 12-14-19		
Signature of a member or authorized representative of a member		
- Zacaries Sancher		

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Filing Fee: \$25.00