## L18000140616

(Requ	estor's Name)	<u></u>
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	 ne)
(Docu	ment Number)	
Certified Copies	Centificates	s of Status
Special Instructions to Fili	ing Officer:	





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R. WHITE FEB 11 2020

## **COVER LETTER**

Registration Section Division of Corporations

TO:

L.D.A REA	AL ESTATE 3, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	EHUD SIMHI		
		Name of Person	<del></del>
		Firm/Company	
	2575 NE 214th St	N. C.	
	Miami , FL 33180	Address	
	Nissanrealestate@gmail.cor	City/State and Zip Code  n to be used for future annual report not	tification)
For further information c	oncerning this matter, please co		,
Ehud Simhi		561 3034807 at ()	
Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration : Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, Fl	orporations Tallahassee oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

L.D.A REAL ESTATE 3, LLC	2020 J 15 PH	' n
(Name of the Limited Liabilit (A Florida	y Company as it now appears on our records.) Limited Liability Company)	<del>12:12.</del>
The Articles of Organization for this Limited Liability Co Florida document number 1.18000140616	ompany were filed on <u>06/06/2018</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
DiAmore Real Estate 3, LLC		
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>enter t</u>	he name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Floi	rida
	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 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 Type of Action Address **Title** Name | \_\_\_\_\_ □Remove \_\_\_\_\_ □Change \_\_\_\_ Remove \_\_\_\_\_\_ Change \_\_\_\_\_\_ □Remove \_\_\_\_\_ Change \_\_\_\_\_ Remove \_\_\_\_\_ □Change 

o. mamen 	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note: 1	e date, if other than the date of filing:
If the record record is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	Invw7 9. 2020)
	Signature of a member or authorized representative of a member
	Typed or printed name of signee