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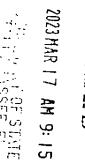
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COVER LETTER

Division of Corporations DIAMORE REAL ESTATE 2, LLC SUBJECT: __ 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: Ehud Simhi Name of Person Firm/Company 2575 NE 214th St Address Miami, FL 33180 City/State and Zip Code Nissanrealestate@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: EHUD SIMHI Daytime Telephone Number Name of Person 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 & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address:

Registration Section

TO:

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

DIAMORE REAL ESTATE 3, LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our reco Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Co Florida document number <u>1.18000140616</u>	ompany were filed on	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:	
D'Amore Real Estate 3, LLC		
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered	office address on our records ente	2023 HAR 17 AM 9: The new region of the Part the Table 19 ST Transport
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, eme	er the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	ess
	City	loridaZip Code
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
:			□Add
•			□Remove
			□Change
			□ Add
		□Remove	
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n an ei Note:	ive date, if other than the date of filing:
record is fi	d 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 led.
	2/20/2023
Dated	Colin
	Signature of a member or authorized representative of a member
	Ehud Simhi

EH. E. Caro