## L18000168419

(Req	uestor's Name)	1
(Add	ress)	
(Add	ress)	
(i tou	(030)	
	<u>-</u>	
(City	/State/Zip/Phon	e#)
PICK-UP	∐ WAIT	MAIL
(Busi	iness Entity Na	
<b>(</b> -1-1-1)	, .	,
(Doc	ument Number	)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	}
		ļ
		ļ

Office Use Only



700354041217

11/08/20--81828--888 \*\*85.88

DEC 11 2020 S. YOUNG



## **COVER LETTER**

TO: Registration Section Division of Corporations

SCUTT SUBJECT:	INA SIGNATURE R	REAL ESTATE SERVIC	ES, LLC
3000001.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kristen King Jaiven, Esq.		
	SCUTTINA SIGNAT	Name of Person URE REAL ESTATE SERV	'ICES, LLC
		Firm/Company	<u> </u>
	6699 North Federal Highw	vay: Suite 103	
	Boca Raton, FL 334	Address 87	
	kristen@quadcompanies.co	City/State and Zip Code	
	E-mail address: (	to be used for future annual report notif	ication)
For further information c	oncerning this matter, please co	all:	
Kristen King Jaiven, Esc	<b>ļ</b> .	561 300-6921	
Name o	f Person	at () Area Code Daytime	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 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

(Name of the Lim	ited Liability Comp	any as it now appears on our Liability Company)	records.)
			2
The Articles of Organization for this Limited	Liability Company	y were filed on 07/12/2	2018 and assigned
Florida document number L1800016841	19		P
This amendment is submitted to amend the fo			6:07
A. If amending name, enter the new name	of the limited lial	bility company here:	
The new name must be distinguishable and contain the	n and "Limited Link	(lity Company "the Assignation	n of LC" as the abbrariation of LC"
ne new name must be distinguishable and contain the	words (Limited Lian	niny Company, the designation	ii T.E.C. or the appreviation T.E.C.
Enter new principal offices address, if appli	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)	<del></del> .	
		6699 North Feder	al Highway
Enter new mailing address, if applicable:	T DOV	Suite 103	
Mailing address MAY BE A POST OFFICE BOX)		Boca Raton, FL 33	3487
		<u> </u>	<del></del>
B. If amending the registered agent and/or	registered office	address on our records,	enter the name of the new registe
gent and/or the new registered office addr	ess here:		
Name of New Registered Agent:	Jack Jaiven		
tvanie of New Registered Agent.	6600 North Lis	ederal Highway; Suite 103	
New Registered Office Address:	WISS HORIT FO		e melden m
	D., D	Enter Florida stree	22.107
	Boca Raton		, Florida 3.548 /
		City	Zip Code

<u>New Registered Agent's Signature, il changing Registered Agent:</u>

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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Jack Jaiven	6699 North Federal Highway; Suite 103	
		Boca Raton, FL 33487	□Add
			□Remove
		6699 North Federal Highway; Suite 103	□Change
MGR	Ben Schachter	Boca Raton, FL 33487	
			□Add
		<del></del>	□Remove
			□Change
			□Add
		<del></del>	□Remove
			□Change
		□Add	
			□Remove
			□Change
	<del></del>	<del></del>	□Add
			□Remove
			_ □Change
<del></del>			□Add
			□Remove
			Change

_	
-	
-	
_	
-	
-	
-	
-	
_	
-	<del></del>
_	
-	
-	
-	
-	
Note:	ive date, if other than the date of filing:
	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.
rd is fi	October 29 2020
rd is fi	
rd is fi	
rd is fi	October 29  2020  Signature of a member or authorized representative of a member