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SECRETARY OF STACE DIVISION OF CORPORATIONS

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Registration Section

TO:

Division of C	Corporations		
	, REAL ESTATE SERVICES, L.I	C.	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	OSCAR ACHARANDIO		
•		Name of Person	
	ROYAL REAL ESTATE	SERVICES, L.L.C.	
		Firm/Company	
_	10800 NW South River Dr	rive	
		Address	
	MEDLEY, FL 33178		
		City/State and Zip Code	
	OSCAR@PROTRANSPOR		
		to be used for future annual report noti-	fication)
For further information	on concerning this matter, please co	all:	
MARLENE MUNO	Z.	305 9109655 at ()	
Nar	ne of Person		e Telephone Number
Enclosed is a check for	or the following amount:		
□ \$25.00 Filing Fee	e ■ \$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)
Reg Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co	on rations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROYAL REAL ESTATE SERVICES, L.I.,C.		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our rec itted Liability Company)	ords.)
The Articles of Organization for this Limited Liability Completion document number 1.18000173723	pany were filed on 08/29/2003	and assigned
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited	liability company here:	
\$/A		
he new name must be distinguishable and contain the words "Limited	Liability Company," the designation "I	.LC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRES	<u></u>	
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and the state of t	N/A	70 A C
nter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
		-
8. If amending the registered agent and/or registered egistered agent and/or the new registered office address Name of New Registered Agent: N/A		rds, enter the name of the
New Registered Office Address:	Enter Florida street ad	dress
		Thurst die
		FloridaZy 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MERIDIAN PROPERTY HOLDING COMPANY INC.	10800 NW SOUTH RIVER DRIVE MEDLEY, FL 33178	
			□ Remove
			Change
			□ Add
			Remove
			□ Change
			Add
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ective	08/22/2018 date, if other than the date of filing:	
i effect te: f	ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pur the date inserted in this block does not meet the applicable statutory filing requirements, this date will	suant to 605.020 not be listed a
	s effective date on the Department of State's records.	
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on	the earlier o
he 9	Oth day after the record is filed.	
ted		
	Signature of a member or authorized representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00