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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
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COVER LETTER

TO:	Registration Se Division of Cor		, Spanish a second	
CITTOR		LITAN INVESTMENT INTE	RNATIONAL REALTY, LLC	
SUBJI	EC1:	Name of Lim	ited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please	return all correspo	ndence concerning this matter	to the following:	
		KIEL GREEN		
			Name of Person	
		METROPOLITAN INVES	STMENT, LLC	
			Firm/Company	
		1200 BRICKELL AVE., S	TE 1450	
			Address	
		MIAMI, FL 33131		
		KIEL.GREEN@METROPO	City/State and Zip Code DLITANINVESTMENT.COM	
		E-mail address; (t	to be used for future annual report notifi	cation)
For fur	rther information co	oncerning this matter, please ca	all:	
KIEL	GREEN		772 332-1869	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclos	ed is a check for th	e following amount:		
■ \$2	5.00 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF

2019 JAN -2 AH 11: 25

METROPOLITAN INVESTMENT INTERNATIONAL REALTY, LLC SECSCI, (Name of the Limited Liability Company as it now appears on our records 5.35E, FL (A Florida Limited Liability Company)

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 vemoved from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ACO CAPITAL GROUP LLC	1230 LISBON STREET	□ Add
		CORAL GABLES, FL 33134	
			■ Remove
			□ Change
		·	□ Remove
			☐ Change
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ective date, if other than the d reffective date is listed, the date must be: If the date inserted in this bloc rument's effective date on the Dep	e specific and cannot be k does not meet the a	applicable statutory	or more than 90 days		
record specifies a delayed on the specifies and leaved the specifies and second the specifies are specifies.		ıt not an effecti	ve time, at 12:0)1 a.m. on the ea	arlier o
DECEMBER 26 ed	2018	_			
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00