L18000240205

(Re	questor's Name)	
bA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<i>=</i> #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	:

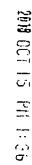
Office Use Only



900335813089

10/15/19--01006--019 **540.00

OCT 16 2019 M. SOLOMON



COVER LETTER

Division of Corp			
DAREIT LL SUBJECT:	С		
300000 I.	Name of Lim	ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	REHLE, DAVID		
		Name of Person	
	DAREIT LLC		
		Firm/Company	
	2280 W OAKLAND PAR	K BLVD, SUITE 225C	
		Address	
	OAKLAND PARK, FL 33	3311	
	INFO@US.OFFICE201.NI	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information co	ncerning this matter, please c	all:	
RICHARD BERTOSSA		507 4910380	
Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	: 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DAREIT LLC					
(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on o Liability Company)	ir records.)		
The Articles of Organization for this Limited I	iability Company	were filed on $\frac{10/10/20}{}$	18	and assigne	ed
Florida document number L18000240205	·				
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name o	of the limited liab	ility company here:			
				•	FK 3
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designat	ion "LLC" or the abb	reviation "L.L.C.	130
Enter new principal offices address, if applicable:		2880W OAKLAND P	ARK BLVD		
Principal office address MUST BE A STREI	ET ADDRESS)	SUITE 225C		, ; -	Ü
		OAKLAND PARK, F	L 33311	• (•	
Enter new mailing address, if applicable:		2880W OAKLAND P	ARK BLVD	4 4 1	00
Mailing address MAY BE A POST OFFICE	••				
		OAKLAND PARK, F	L 33311	<u>-</u>	
B. If amending the registered agent and registered agent and/or the new registered of	ffice address her			-	the
Name of New Registered Agent:	CORPORATIO	ONS SERVICES & REC	STERED AGENT		
New Registered Office Address:	2398 COMME	RCIAL WAY, SUITE 22			
		Enter Florida str			
	SPRING HILL		, Florida ³⁴⁶		
		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. Thereby 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	REHLE, DAVID	2880W OAKLAND PARK BLVD	
		CHITT 235C	Add
		SUITE 225C	☐ Remove
		OAKLAND PARK, FL 33311	O Kenkee
			Change
			□ Remove
			Change
			☐ Remove CO
			Change
			Add
			Remove
		<u> </u>	Change
			Add
			□ Remove
			Change
			🗆 Add
			□ Remove
			☐ Change

			· · · · · · · · · · · · · · · · · · ·		

		 -	<u> </u>		
		······································	,		
				· · · · <u>· · · · · · · · · · · · · · · </u>	
				··	;
					."
					<u> </u>
					.2
					() ()
					
ctive date, if other than the	date of filing:			_ (optional)	
etive date, if other than the effective date is listed, the date mu e: If the date inserted in this b iment's effective date on the E	st be specific and cannot lock does not meet th	e applicable stat	tiling or more than 90 dutory filing requireme	ays after tiling.) Pursuan nts, this date will not	it to 605.02 be listed
ecord specifies a delaye ne 90th day after the rec	d effective date, ord is filed.	but not an ef	fective time, at 1	2:01 a.m. on the	earlier
td	201	9		1	
	·	<u> </u>	/1/	Y /_	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00