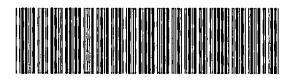
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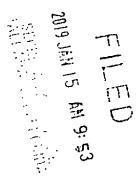
(Red	questor's Name)	
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JAN 23 2019 I ALBRITTON

COVER LETTER

Division of Cor	porations *	•	
ORL 230 B	URMA LLC		
	Name of Lim	ited Liability Company	
he enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	ALINE DARMOUNI		
		Name of Person	
	EXCO US ATRIUM		
	Name of Limited Liability Company seed Articles of Amendment and feets) are submitted for filing. urn all correspondence concerning this matter to the following: ALINE DARMOUNI Name of Person		
	44 W FLAGLER STREET	- SUITE 2300	
		Address	· <u>····</u>
	MIAMUFL-33130		
	office@excous.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	alt:	
Aline DARMOUNI			
Name o	d Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS: Registration Section

TO:

Registration Section

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

2019 JAH 15 AH 9:53

ORL 230 BURMA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	ompany were	filed on 11/06	5/2018	and assigned
Florida document number L18000259885	_·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted <u>liability</u>	company here	; ;	
REAL BLOX BUILDERS LLC				
The new name must be distinguishable and contain the words "Limite	ted Liability Co	mpany," the desi	gnation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	ESS)			
Enter new mailing address, if applicable:		·		
(Mailing address MAY BE A POST OFFICE BOX)	_			
B. If amending the registered agent and/or registered agent and/or the new registered office addresses and the registered agent and/or the new registered agent and/or registered agent ag		address on (our records, <u>ente</u>	r the name of the new
Name of New Registered Agent:			<u>. </u>	
New Registered Office Address:				
			a street address	
		City .	Florida _	Zip Code
New Registered Agent's Signature, if changing Registered		.iir		zip Couc
		a to alite o		
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and coacept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete perf ent as provi	ormance of m ded for in Ch	y duties, and Lan apter 605, F.S. O	n familiar with and r, if this document is

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	Asher OUAZANAN	833 NE 191ST STREET MIAMI, FL 33179	■ Add
			□ Remove
			Change
			Add
			☐ Remove
			Change
			Remove
			□ Change
			□ Add
			☐ Remove
			Change
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			Remove
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etive date, if other than the officetive date is listed, the date must in If the date inserted in this bloment's effective date on the De	be specific and cannot be pri ck does not meet the appl	icable statutory filing		
ecord specifies a delayed le 90th day after the reco		not an effective ti	me, at 12:01 a.m. on	the earlier (
January 2nd	2019			
	Ä			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00