Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: BLACKLEDGER ENTITY MANAGEMENT LLC Account Name

Account Number : I20150000089 Phone

: (305)444-8800

Fax Number

: (305)444-4010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KLIFFER REALTY LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

EXAMINER

ANTICLES OF AMENDMENT

TO ARTICLES OF ORGANIZATION OF

KLIFFER REALTY LLC		
(Name of the Limited Liability Con (A Florida Limite	ppany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on December, 2018	and assigned
Florida document number L18000287433		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
Calgan Realty Investments LLC		
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		2019
		J.,
		15
Enter new mailing address, if applicable:		13.
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(Mailing address MAY BE A POST OFFICE BOX)		- <u> </u>
		7 6
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		enter the name of the ne
Name of New Registered Agent:	 	
Navy Registered Office Address:		_
New Registered Office Address:		
New Registered Office Address:	Enter Florida street address	
New Registered Office Address:	Enter Florida street address , Flori	da

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

Page 1 of 3

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Au	thorized Member		
Title	Name	Address	Type of Action
			☐ Remove
			Change
			D Add
			□ Remove
		Change	
			Add
		Remove	
		<u> </u>	Change
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			* ***	* A
fective date, if other than the date of filing: in effective date is listed, the date must be specific and cannot			_(optional)_	
in effective date is listed, the date must be specific and cannot lote: If the date inserted in this block does not meet the	be prior to date of f spolicable statut	ling or more than 90 d ory filing requireme	ays after filing.) ints. this date w	ill not be liste
cument's effective date on the Department of State's r	ecords.	, , ,	•	-
record specifies a delayed effective date, b	out not an effe	ctive time, at 1	2:01 a.m. o	n the earlie
The 90th day after the record is filed.				
sted,	·			
/ /•				
Signature of nymember	or/authorized repre	sentative of a member		

Page 3 of 3