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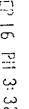
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COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJ		EALTY GROUP OF FL LLC		
3003	ECT	Name of Lim	ited Liability Company	
The er	nclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
		PAULA D PHILPOT		
			Name of Person	<u>. </u>
		GLOBAL REALTY GRO	UP OF FL LLC	
		<u></u>	Firm/Company	
		16181 90TH ST N		
			Address	
		LOXAHATCHEE, FL 334	170	
			City/State and Zip Code	
		PDP724@GMAIL.COM		
		E-mail address: (to be used for future annual report notifi	cation)
For fu	rther information co	ncerning this matter, please ca	all:	
PAUL	.A D PHILPOT		561 644-0690 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for the	e following amount:		
\$2	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



2019 SEP 16 PM 3: 32

GLOBAL REALTY GROUP OF FL LLC			
(<u>Name of the Limited Liab</u> (A Flori	ility Company ida Limited Lia	y as it now appears on our ability Company)	records.)
The Articles of Organization for this Limited Liability Florida document number 1.19000020731	Company w	vere filed on JANUARY	18, 2019 and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liabili	ity company here:	
The new name must be distinguishable and contain the words "Li	imited Liabilit	y Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		16181 90TH ST N	
(Principal office address MUST BE A STREET ADDRESS)		LOXAHATCHEE, FL 3	3470
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg	gistered offi Idress here:	ice address on our re	cords, enter the name of the ne
Name of New Registered Agent: DAY	VID PAUL C	CRAVEN	
New Registered Office Address:			
		Enter Florida street	address
			_, Florida
		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, I hereby confirm that the limited liability company has been notified in writing of this change.

f 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	PAULA D PHILPOT		🗖 Add
		16181 90TH ST N. LOXAHATCHEE, FL 33470	■ Remove
			Change
MGR	DAVID PAUL CRAVEN	16181 90TH ST N, LOXAHATCHEE, FL 33470	Add
			Remove
			Change
AMBR	PAULA D PHILPOT	16181 90TH ST N	= Add
		LOXAHATCHEE, FL 33470	Remove
			☐ Change
			Remove
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If an ef Note:	rive date, if other than the fective date is listed, the date mu. If the date inserted in this binent's effective date on the D	st be specific and ock does not n	cannot be prior to neet the applical	date of filing or moble statutory filing	requirements, this da	ing.) Pursuant to 605,0207
he red The	cord specifies a delaye 90th day after the rec	d effective of ord is filed.	late, but not	an effective ti	me, at 12:01 a.r	n. on the earlier of
Dated	SEPTEMBER 12		2019	_•		
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Page 3 of 3

Filing Fee: \$25.00