19000020972

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000324261400

02/11/19--01024--011 *+23.00



R. WHITE

COVER LETTER

	gistration Sec rision of Corp			
(11 + 15 1 E 1 Z 17P)		1ERCIAL REAL ESTATE LL	С	
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	d Articles of A	Amendment and fee(s) are subt	nitted for filing.	
Please return	all correspo	ndence concerning this matter t	to the following:	
		JORGE R. CAPOTE		
		FSC COMMERCIAL REA	Name of Person	
		24814 STATE ROAD 54	Firm/Company	
			Address	
		LUTZ, FL 33559		
		Jorge@facilitiesfl.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notif	fication)
For further i	nformation co	oncerning this matter, please ca	ill:	
Jorge Capot	e		813 545-5364 at ()	
	Name o	l Person	Area Code Daytimo	e Telephone Number
Enclosed is	a check for th	ne following amount:		
\$25.00 B	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:

TO:

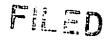
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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 FEB 11 PM 2:59 (Name of the Limited Liability Company as it now appears on our records.)?

(A Florida Limited Liability Company)

(A Florida Limited Liability Company)

(A Florida Limited Liability Company) FSC COMMERCIAL REAL ESTATE LLC

The Articles of Organization for this Limited Liability Comp Florida document number $\frac{L19000020972}{L19000020972}$.	pany were filed on 01/18/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation	"LI.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	s here:	
	Enter Florida street	address
	Cin	Florida
New Registered Agent's Signature, if changing Registered Agent	·	z.p Code
		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	plete performance of my duti t as provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is
<u>11</u>	Changing Registered Agent, Sign	ature 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>	Name	<u>Address</u>	Type of Action
AMBR	ALEXANDER KHOYI	24814 STATE ROAD 54, LUTZ, FL 33559	■ Add
			Remove
			Change
AMBR	CHRISTOPHER CAPOTE	24814 STATE ROAD 54 LUTZ, FL 33559	Add
			Remove
			☐ Change
			Pemove
			Change
			Add
			Remove
		· · · · · · · · · · · · · · · · · · ·	Add
			□ Remove
			☐ Change
			□ Add
			Remove
			☐ Change

. If amending any othe	er information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
	
Note: If the date insert	the continuity of the date of filing: (optional) In the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 ted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ate on the Department of State's records.
	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: er the record is filed.
FEBRUARY 6	2019
	0. 20la
	Signature of a member or authorized representative of a member
Gwan F W	alkowiak. Esquire
——————————————————————————————————————	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00