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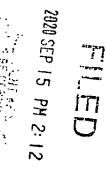
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OCT 24 2020 S. YOUNG

COVER LETTER

TO: Registration Se Division of Cor			
ASER RE,	LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Benjamin Tamir, CPA		
		Name of Person	
	Goldring Lowenthal Tami	г & Co.	
		Firm/Company	
	16850 Collins Ave. #112-	306	
		Address	
	Sunny Isles Beach, FL 33	160	
		City/State and Zip Code	
	ben@usacpa.net	to be used for future annual report no	ti(instina)
For further information of	concerning this matter, please c		uncation)
Benjamin Tamir, CPA		305 224-0440	
Name o	of Person	Area Code Daytii	me Telephone Number
Enclosed is a check for the	he 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		Street Address: Registration S	ection
Registration : Division of C		Division of Co	
P.O. Box 632	27	The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ASER RE, DICC	<u> </u>	~_
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	520 120
The Articles of Organization for this Limited Liability C Florida document number L19000027965		and assigned
This amendment is submitted to amend the following:	·	PH 2: 12
A. If amending name, enter the new name of the lim	ited liability company here:	72
AM Guota 110		
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDI	RESS)	
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 address here:	d office address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florio	d a
	, Florid	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

ACED DE LLC

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 mercly 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 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	Address	Type of Action
MBR	GUETA, AVI	GUETA, AVRAHAM	
		10980 BAL HARBOR DRIVE	□Remove
		BOCA RATON, FL 33498	■Change
MBR SHVIKA, SHAU	SHVIKA, SHAUL	10980 BAL HARBOR DRIVE	□Add
		BOCA RATON, FL 33498	■Remove
			□Change
MBR	MBR HAFIF, ELIYAHU	10980 BAL HARBOR DRIVE	
		BOCA RATON, FL 33498	Remove
			☐Change
MBR HAFIF, RAMI	HAFIF, RAMI	10980 BAL HARBOR DRIVE	□Add
		BOCA RATON, FL 33498	■Remove
			□Change
			□Add
			□Remove
			[]Change
	·		□Add
			□Remove
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an effe lote:	ve date, if other than the date of filing: cetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ent's effective date on the Department of State's records.
record is file	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
	September 6 . 2020
ated _	
ated ₋	Signature of a member or authorized representative of a member

Filing Fee: \$25.00