L19000079323

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COVER LETTER

	Registration Se Division of Corp			
cup ir c		ALTY ADVISORS, LLC		
SUBJEC	· I :	Name of Lim	ited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		DION J. MONIZ		
		HAND ARENDALL HAR	Name of Person RISON SALE LLC	
		35008 EMERALD COAST	Firm/Company F PARKWAY, SUITE 500	
		DESTIN, FLORIDA 3254	Address	<u>. </u>
		sfranco@rodosrealty.com	City/State and Zip Code	
		E-mail address: ()	to be used for future annual report notif	ication)
For furthe	er information co	oncerning this matter, please ca	all:	
DION J.	MONIZ		850 650-0010 at ()	
	Name of	Person	Area Code Daytime	: Telephone Number
Enclosed	is a check for th	e following amount:		
S 25.0	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:

то:

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

RODOS REALTY ADVISORS, 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 Company were filed on $\frac{03/21/2019}{1}$ and assigned Florida document number _____119000079323 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 "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

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 STEVEN ED ANGO	Address	Type of Action
MGR	STEVEN FRANCO	34990 EMERALD COAST PARKWAY, SUITE 300	⊟ Add
		DESTIN, FLORIDA 32541	
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f an effectiv Note: If t	date, if other than the date of filing:	
The 90	d specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of the day after the record is filed.	of:
Dated	5-2-19 **Signature of a member or authorized representative of a member **Structure** **Struc	
	Steven Franco Typed or printed name of signee	

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Filing Fee: \$25.00