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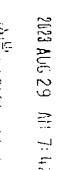
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

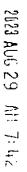




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08/29/23--01025--025 **25.00







COVER LETTER

TO: Registration Section

Division of Cor	rporations		
	AS REALTY GROUP LLC		
SUBJECT:	Name of Lim	ited Liability Company	<u></u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing	
		-	
riease return an correspo	ondence concerning this matter	to the following:	
	DENNIS MERAZ		
		Name of Person	
		Firm/Company	
	5230-7 Baymeadows Rd		
•		Address	
	JACKSONVILLE, FL 322	117	
		City/State and Zip Code	
	É-mail address: (to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
DENNIS MERAZ		954 8820071 at ()	
Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address: Registration So	ection
Registration Section Division of Corporations		Division of Co	rporations
P.O. Box 632		The Centre of	
Tallahassee, l	r に 323 14	2413 N. Monre	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 AUG 29 AM 7: 42

HONDURAS REALTY GROUP 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 of Florida document number L19000079916	were filed on $\frac{03/22/2}{}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ly Company," the design	ation "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)		
(Halling dualess HAT BE A FOST OFFICE BOA)		
B. If amending the registered agent and/or registered office as agent and/or the new registered office address here: Name of New Registered Agent:	idress on our recor	ds, enter the name of the new registered
New Registered Office Address:	 	
	Enter Florida si	rect address
	City	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City	Zip Couc
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	performance of my covided for in Chap	duties, and I am familiar with and ter 605, F.S. Or, if this document is

If 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
AMBR	YESSICA BASKIN	4929 SKYWAY DR APT 2406	
		JACKSONVILLE, FL 32256	=Remove
			□Change
			□Add
			□Remove
			□Change
<u></u>			
			Remove
			□Change
	~ ~		□Add
			Remove
		·	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			[]Chunga

	
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•	
•	
Effect	ive date, if other than the date of filing:
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
docun	nent's effective date on the Department of State's records.
	rd anniform delayed offension days have not an effective time at 12.01 and the continue of the The Oost Level Cont
rd is fi	rd 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 led.
Dated	08/23/2023
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representance of a member
	Signature of a member of authorized representative of a member

Filing Fee: \$25.00