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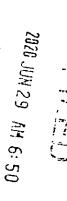
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SANTOS R	EAL ESTATE EQUITIES LI	С
30bite 1.	Name of Lim	ited Liability Company
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.
Please return all correspo	ndence concerning this matter	to the following:
	LUCIANO M DEMELLO	
		Name of Person
	SANTOS REAL ESTATE	EQUITIES LLC
		Firm/Company
	2205 OSPREY AVE	
		Address
	ORLANDO, FL 32814	
		City/State and Zip Code
	lmdemello@aol.com	
	E-mail address: (	to be used for future annual report notification)
For further information c	oncerning this matter, please ca	all:
LUCIANO M DEMELL	0	516 9025417 at ()
Name o	f Person	Area Code Daytime Telephone Number
Enclosed is a check for the	ne following amount:	
X \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SANTOS REAL ESTATE EQUITIES LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	•
Florida document number L19000143768	
This amendment is submitted to amend the following:	, <u>, , , , , , , , , , , , , , , , , , </u>
A. If amending name, enter the new name of the limited liab	ility company here:
	NIA
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	Pater Florida street address
	. Florida Zin Coda

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

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>	<u>Address</u>	Type of Action
MGR	ROSILENE DE FREITAS SANTOS	2205 OSPREY AVE	<b>=</b> Add
		ORLANDO, FL 32814	□Remove
			☐ Change
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			□Change
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