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COVER LETTER

_	ision of Corpor			
SUBJECT:	CAK	POGENIC (REAL ESTAT	EUC
SOMJECT.		Name of Limit	ed Liability Company	
The enclosed	d Articles of Ame	endment and fee(s) are subm	nitted for filing.	
Please return	all corresponde	nce concerning this matter to	the following:	
		WYNTE	TR V GAL	INDEZ
	•	· · · · · · · · · · · · · · · · · · ·	Name of Person	·
		CARPOC	ENIE REA	L ESTATE LLZ
			Firm/Company	
		9508 CA	RLYLE AVE	=
			Address	
		SURF	SIDE FL : City/State and Zip Code deze & mail.	33154
	•		City/State and Zip Code	
	_		be used for future annual repo	
For further i	nformation conc	erning this matter, please cal	·	
V. 7V	WIEW Co	(1) (1)	42	ر ا ا ۱ س ۲ س
W Y	Name of Per	Son Son	at (<u>347</u>) <u>43</u> Area Code	Davtime Telephone Number
				,
Enclosed is	a check for the fo	ollowing amount:		
≥ \$25.00 F	Filing Fee l	□ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

TO ARTICLES OF ORGANIZATION OF

CARPO GENI	e REAL	ESTATE	LLC		
(Name of the Limited L. (A F	iability Company as Iorida Limited Liabili	it now appears on or ty Company)	ır reçords.)		
The Articles of Organization for this Limited Liabil Florida document numberL 19000 1682	ity Company were 35	filed on 6.	26.19	and assigne	d
This amendment is submitted to amend the following	ng:				
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 Co	ompany," the designal	ion "LLC" or the ab	breviation (IDL.C.)	
Enter new principal offices address, if applicable	<u> </u>			<u> </u>	<u> </u>
(Principal office address MUST BE A STREET A	DDRESS)				
					<u>(</u>
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BO)	<u>X)</u>			· .	
B. If amending the registered agent and/or registered agent and/or the new registered office	_	address on our	records, enter	the name of t	he new
Name of New Registered Agent:					
New Registered Office Address:		Enter Florida str	eet address		
			, Florida		
_		City		Zip Code	
New Registered Agent's Signature, if changing Regis	stered 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MDR	WYNTER V. GALINDEZ	9508 CARLYLE AVE	
		SURFSIDE, FL 33154	Remove
			Ò (Change
			□ Remove
			Change
			Remove
			Change
			П Кетюче
			Change
			🗆 Add
			П Ветюче
			
			🗖 Add
			Remove
			Change

	changing pamending authorize person from AR to and adding pamending midble initial
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·	<u> </u>
ective date, if ot	ther than the date of filing: (optional) sted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60
te: If the date inse	sected in this block does not meet the applicable statutory filing requirements, this date will not be list date on the Department of State's records.
	· · · · · · · · · · · · · · · · · · ·
	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earl
	after the record is filed.
he 90th day a	after the record is filed.
he 90th day a	after the record is filed.
	after the record is filed.

Page 3 of 3

Filing Fee: \$25.00