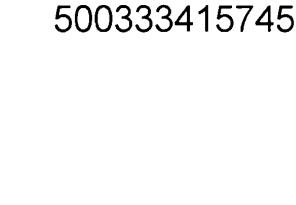
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| Special Instructions to Filing Officer:  |
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## COVER LETTER

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| TO:              | Division                              |                               | ction<br>porations  | મેં એ   |  |  |
|------------------|---------------------------------------|-------------------------------|---|---|--|--|
| eu <b>n</b> te   | LA                                    | ROSA                          | REALTY INTERNATIONAL  | LLC   |  |  |
| SOBJE            | .CI:                                  |                               | Name of Lim   | ited Liability Company  |  | Telephone Number  S60.00 Filing Fee, Certificate of Status & Certified Copy tadditional copy is enclosed |
| The enc          | closed Art                            | icles of .                    | Amendment and fee(s) are sub-   | mitted for filing.  |  |  |
| Please r         | return all o                          | correspo                      | ndence concerning this matter   | to the following:   |  |  |
|                  |                                       |                               | LUIS R CALDERON   |   |  |  |
|                  |                                       |                               | <u> </u>  | Name of Person  |  | _  |
|                  |                                       |                               | BELAIR ACCOUNTING   | SERVICES, INC.  |  |  |
|                  |                                       |                               |   | Firm/Company  |  | <del>-</del>   |
|                  |                                       |                               | 1627 E. VINE ST. STE 11   | 0   |  |  |
|                  |                                       |                               |   | Address   |  | _  |
|                  |                                       |                               | KISSIMMEE, FL 34744   |   |  |  |
|                  | City/Stac and Zip Code ADLUSH@AOL.COM |                               |   |   |  |  |
|                  |                                       |                               | E-mair กลีฮักยนะ ()   | is helps at the future annual                                 | report nonfication)  |  |
| For furt         | her infort                            | nation co                     | oncerning this matter, piecse or  | ď.  |  |  |
| LUIS R. CALDERON |                                       | -07 94<br>ae ()               |   |   |  |  |
|                  |                                       | Name o                        | Person  | A va Code   | Daytime Telephone Number   | er   |
| Enclose          | ed is a che                           | ck for th                     | e following amount:   |   |  |  |
| <b>■ \$25</b>    | 5.00 Filing                           | ţ Fee                         | □ \$30.00 Filing Fee & Certificate of Status                                    | En \$55.06 filling Fee Cortified Copy traditional copy is one | Certific<br>Postal Certifie  | ate of Status & d Copy   |
|                  | 1                                     | Registr<br>Divisio<br>P.O. Bo | ING ADDRESS:<br>ation Section<br>n of Corporations<br>ox 6327<br>ssee, FL 32314 | Registrat<br>Division<br>Cifficn 5                            | DYCOURIER ADDRESS:<br>fon Section<br>of Corporations<br>building<br>secutive Center Circle |  |

Fallahasser, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ( <u>Name of the Limited Liability</u><br>(A Florida   | ty Company as it now appears on our record<br>(Limited Liability Company) | <u>s.</u> )                  |
|--|---|------------------------------|
| The Articles of Organization for this Limited Liability C  | Company were tiled on 08/15/2019  | and assigned                 |
| This amendment is submitted to amend the following:  | ·   |                              |
| A. If amending name, enter the new name of the limit   | ited liability company here:  |                              |
| LA ROSA REALTY INTERNACIONAL , LLC   |   |                              |
| he new name must be distinguishable and contain the words "Lim   | ited Liability Company," the designation "LLC                             | or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable:  |   | 19 <b>\$</b>                 |
| <u>Principal office address MUST BE A STREET ADDR</u>  | RESS)   |                              |
|  |   | <u> </u>                     |
|  |   |                              |
| Inter new mailing address, if applicable:  |   | <u> </u>                     |
| Mailing address MAY BE A POST OFFICE BOX)  |   | 5,0                          |
|  |   |                              |
| 3. If amending the registered agent and/or regis<br>egistered agent and/or the new registered office add |   | s, enter the name of th      |
| Name of New Registered Agent:  |   |                              |
| New Registered Office Address:   | Enter Florida street addres   | 58                           |
|  |   |                              |
|  | City , Flo  | orida<br>Zip Code            |

## 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, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being ad or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>  | <u>Address</u> | Type of Action    |
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| ective date, if other than the date of filing:   | (optional)  | 5 030 |
| reffective date is listed, the date must be specific and cannot be prior to te: If the date inserted in this block does not meet the application of the date inserted in the Does to form the prior to the date inserted in the Does to form the date in t | ple statutory filing requirements, this date will not be list | ed a  |
| cument's effective date on the Department of State's records.  |   |       |
| record specifies a delayed effective date, but not<br>The 90th day after the record is filed.  | an effective time, at 12:01 a.m. on the earlie                | er c  |
| ted SEPTEMBER 09 2019  |   |       |
|  |   |       |
| 1/ ha men  |   |       |
| Signature of a member of author  | ized representative of a member                               |       |

Page 3 of 3

Filing Fee: \$25.00