## L19000259791

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## **COVER LETTER**

Division of Corporations
BJECT: Hodern Really Group LLC Name of Limited Liability Company
e enclosed Articles of Amendment and fee(s) are submitted for filing.
ease return all correspondence concerning this matter to the following:
Hyles Pearl Name of Person
Firm/Company
241 NW 8th 8T
Boca Paton FL 33432  City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Myles Pearl at (867) 660 - 1393  Area Code Daytime Telephone Number
Name of Person Area Code Daytine receptation Name
**Total control of the following amount:  2 \$25.00 Filing Fee \$ \$30.00 Filing Fee \$ Certificate of Status  Certificate of Status    \$55.00 Filing Fee \$ Certificate of Status

Registration Section

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida document number 119 000 259791 SECTIFICARY OF CTATE
FALEAHASSEE FLORIDA 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

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

Title Name Address Type of Action

			Remove
			Change
MBR	Andre Arancibia	3100 Ruerside Drive	<b>∑_⊠</b> Add
		APT 212	
		Coral Springs, FL 3306	S □ Change
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(If an effect	re date, if other than the date of filing:	)207 (1 d as th
f the reco b) The 9	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie 90th day after the record is filed.	r of:
Dated	November 5th 2019	
	Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00