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JUN 1 6 2020 S. YOUNG

COVER LETTER

TO:

Registration Section Division of Corporations

Precise Rea	ilty LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Monica Caymares Salcedo				
		Name of Person			
	Precise Realty LLC				
		Firm/Company			
	14221 SW 120th St #232				
		Address			
	Miami, FL 33186				
		City/State and Zip Code	-		
	donald@senioradvisorcorp.				
	E-mail address: (to be used for future annual report notif	ication)		
For further information c	oncerning this matter, please c	all:			
Donald Shelton		305 803-2073 at ()			
Name o	f Person	Area Code Daytime	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 Sec	stion		
Registration Section Division of Corporations		Division of Corporations			
P.O. Box 632		The Centre of Tallahassee			
Tallahassee, l	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

787

Precise Realty LLC		= "11
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our r Florida Limited Liability Company)	ecords.)
The Articles of Organization for this Limited Liab	ility Company were filed on January 1, 20	20 and assigned
Florida document number L20000006490		න න න
This amendment is submitted to amend the follow	ing:	O .
A. If amending name, enter the new name of the	ne limited liability company here:	
The new name must be distinguishable and contain the word	ls "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or reg agent and/or the new registered office address	_	nter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street e	uddress
		Florida
	City	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Monica Salcedo	14221 SW 120th St. #232	■Add
		Miami, FL 33186	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	block does not	meet the app	licable statutory fili	(op more than 90 days aff ng requirements, t	tional) er filing.) Pursuant to his date will not be l	605.0207 (listed as t
he record specifies a delayed effect ord is filed.	tive date, but n	ot an effective	e time, at 12:01 a.m	on the earlier of:	(b) The 90th day a	fter the
Dated May 20	***=	2020				
	М		thorized representativ			
	Signature o	a member of au	thorized representativ	e of a member		
	3		•			

Filing Fee: \$25.00