

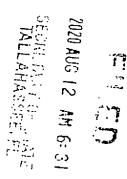
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TO: Registration Se Division of Cor				
	Estate, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing		
	ondence concerning this matter			
	Melissa P. Lanza, Esq.			
		Name of Person		
	Melissa P. Lanza, Esq.			
		Firm/Company		
	104 Crandon Blvd., Sute 4	320		
		Address		
	Key Biscayne, Fl 33149		27.5 27.5 27.7	
		City/State and Zip Code	SECRETARY TALLARY	5
	imontes@altadevelopers.co			· .
		to be used for future annual report notifi	ration) $\widetilde{\mathcal{S}}^{-1}$	•
For further information c	oncerning this matter, please c	all:	SSIZE, FE	a
Melissa P. Lanza, Esq.		305 361-0997	PE 3	
Name o	f Person	at () 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 of Certified Copy (additional copy is enclosed	
Mailing Addres Registration S	Section	Street Address: Registration Sec		
Division of C P.O. Box 632		Division of Corp The Centre of Ta		
Tallahassee, I			Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Adare Real Estate, LLC		
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
ne Articles of Organization for this Limited Liability Company	and assigned	
orida document number L20000012619		
is amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
ne new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" o	r the abbreviation "L.L.C."
nter new principal offices address, if applicable:		_
Principal office address MUST BE A STREET ADDRESS)		2020 AI
	 	
		A
nter new mailing address, if applicable:		SS: N
Aailing address MAY BE A POST OFFICE BOX)		
		- 1
If amending the registered agent and/or registered office a tent and/or the new registered office address here:	ddress on our records, <u>enter th</u>	e name of the new regist
Name of New Registered Agent:	.	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	Enter Florida street address	
	Flori	da
	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 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	Juan Ignacio Montes Labarca	765 Crandon Blvd., #PH-7	∃ Add
		Key Biscayne, Fl 33149	
			□Change
			□Add
			Remove
			Change
			□Remove
			202mgs SECOMAUG
			DAJd
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Dated	8/10)		. <u>20</u>	20						
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Typed or printed name of signee