L200000 19525

Office Use Only



200339868762

ũ⊋/05/20--01006--028 ••25.00

23/01- . - 3 FR 3: 59

R. WHITE FEB 27 2013

TO: Registration So Division of Con			
SUBJECT:	Solomon A Name of Limi	CQUISITIONS ted Lability Company	LLC
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	Jor	dan Solomo	<i>ک</i> ر
	Solomo	Acquisit	ions LLC
	P.O. T	30x 470705 Address	
	Lake Jordan m E-mail address: (t	City/State and Zip Code 1. SOLOMON Cook obe used for future annual report not	32747 anail.com
For further information of	concerning this matter, please ca		O /
Tordar Name o	Solomon of Person	at (954) (a 00 Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION OF

Solomon Acquisitions LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2000019525</u>	were filed on January 13, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Solomon Realty Solutions The new name must be distinguishable and contain the words "Limited Liabil	lity 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)	P.O. Box 470705 Lake Monroe, FL 32747
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: 10968	S NW 21S+ Place Enter Florida street address
Coral	Springs Florida 33071 Zip Code
Now Degistered 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

MGR = Manager AMBR = Authorized Member

•

<u>Title</u>	Name	Address	Type of Action
MGR	Salomon, Jordan	P.O. Box 470705, Lake Monno	
		4798 Cains Wren Trl. Sanford, 3	FL &Remove 2771
			□Change
MGR	Douglas, Amarida	PO.Box 470705, Lake Monroe, F	
		4798 Cains Wren Trl, Sanford	H. ARemove
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
-			□ Add
			□Remove
			Change
			□Add
			□Remove
			□Change

). If amending any o	other information, enter change(s) here: (Attach additional sheets, if necessary.)
 	
 	
.	
	
Note: If the date in	other than the date of filing:
f the record specifies a record is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated Jac	Signature of a member or authorized representative of a member
	Tordan Solomon Typed or printed name of signee

. . . .