

120 000204730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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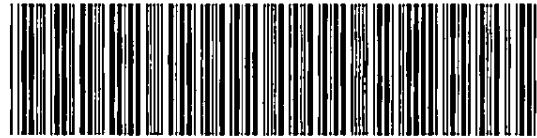
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILING OFFICE
TALLAHASSEE, FL 32301

2020 JUL 28 AM 7:08

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SEP 18 2020

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CCC REALTY GROUP LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles L. Leon Jr.
Name of Person
CCC Realty Group LLC
Firm/Company
10425 SW 112 Avenue, Apt 304
Address
Miami, FL 33176
City, State and Zip Code
chuckh8787@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles L. Leon Jr. 305 712-0388
Name of Person at (Area Code) Daytime Telephone Number

Enclosed is a check for the 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 AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CCC REALTY GROUP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/15/2020

Florida document number L20000204730

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 "LLC."

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

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 Changing Registered Agent, Signature of New Registered Agent

FILED
2020 JUL 28 AM 7:08
CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF FLORIDA
TALLAHASSEE, FLORIDA

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>	<u>Type of Action</u>
MGR	Charles L. Leon Jr. _____	10425 SOUTHWEST 112TH AVENUE, APT. 304 _____	☐ Add
		MIAMI, FL 33176 US _____	☒ Remove
		_____ _____	☐ Change
AMBR	Samantha N. Leon _____	10425 SOUTHWEST 112TH AVENUE, APT. 304 _____	☐ Add
		MIAMI, FL 33176 US _____	☒ Remove
		_____ _____	☐ Change
_____	_____ _____	_____ _____	☐ Add
		_____ _____	☐ Remove
		_____ _____	☐ Change
_____	_____ _____	_____ _____	☐ Add
		_____ _____	☐ Remove
		_____ _____	☐ Change
_____	_____ _____	_____ _____	☐ Add
		_____ _____	☐ Remove
		_____ _____	☐ Change
_____	_____ _____	_____ _____	☐ Add
		_____ _____	☐ Remove
		_____ _____	☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please remove both parties listed above as specific managing members.

The intent is to have this LLC as member managed. Thank you and please send a certified copy and an updated Articles of Organization reflecting these changes.

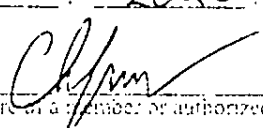
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 603.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July 24 2020



Signature of a member or authorized representative of a member

Charles L. Leon Jr.

Typed or printed name of signer