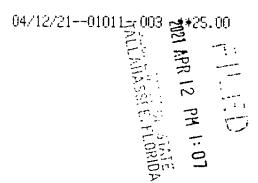
L20 000 2 2 6 1 5 1

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates o	f Status
Octanica dopies		
Special Instructions to	Filing Officer:	

Office Use Only



700363521547



16,

COVER LETTER

'TO: Registration Section

Tallahassee, FL 32314

Division of Cor	porations				
SUBJECT: REAL 31	HOME, LLC	•			
SUBJECT:		nited Liability Company			
		, a , a			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
·	_	-			
	MARQUEZ, MAURICIO	J			
		Name of Person			
		1.41.10 0.1.0001			
	REAL3HOME, LLC				
		Firm/Company			
11053 NW 89TH TERR UNIT 1504					
	· · · · · · · · · · · · · · · · · · ·	Address			
	DORAL, FL 33178				
	040 4-41	City/State and Zip Code			
marqu	2093076 @gmail.com				
	E-mail address: (to be used for future annual report noti	ification)		
For further information c	oncerning this matter, please c	all:			
MARQUEZ, MAURICIO	O J	786 2521193			
Name of Person		at () Area Code Davtim	ne Telephone Number		
TABILE O	1 1 613011	The Code Daynor	ie reiephone ramber		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee,		
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy		
		(,	(additional copy is enclosed)		
Mailing Addres		Street Address:			
Registration S		Registration Se			
Division of C P.O. Box 632	•	Division of Cor The Centre of 1			
i. O. DOA OJZ	,	The Contro of 1	. w w w		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REAL3HOME, LLC		
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Company	ears on our records.) y)
he Articles of Organization for this Limited l	Liability Company were filed on	07/29/2020 and assigned
lorida document number L20000226151		
his amendment is submitted to amend the fol	llowing:	
If amending name, enter the new name	of the limited liability company	here:
AURICIO MARQUEZ LLC		- 2
e new name must be distinguishable and contain the	words "Limited Liability Company," th	
ter new principal offices address, if appli	cable:	APR
rincipal office address MUST BE A STRE.	ET ADDRESS)	<u> </u>
		me p
nter new mailing address, if applicable:		REA 8
failing address MAY BE A POST OFFICE	<u> </u>	
		r records, enter the name of the new registe
ent and/or the new registered office addre	ess nere:	
Name of New Registered Agent:	MAURICIO MARQUEZ	
New Registered Office Address:	11053 NW 89TH TERR1504	
The state of the s	Enter F	lorida street address
	DORAL	, 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

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>	Name	Address	Type of Action
MGR	MARQUEZ, NORA	11053 NW 89TH TERR1504DORAL, FL 33178	□Add
			🗏 Remove
			□Change
			□Add
		3.05. E. J. J. S. C. E. J. S.	Remove PChange
		_	
			T. ORemove
			□Change
			🗖 Add
			Remove
			□Change
			□Add
			□ Remove
			Change
			□Add
			□Remove

									_
<u></u>								.	_
								_	_
									_
									_
								~	_
							<u> </u>	2021	-
-			<u> </u>				는 (본: 조:	₽₽	:
							NSSS.	12	· ·
								PH	: 1
							ORILLA	1: 08	
			-				7	_∞_	_
									_
									_
									-
									-
									_
42 11-4-	, if other tha	n the date of fili	ng:			(optional)		
ective date	e is listed, the da te inserted in t	te must be specific ai his block does not	nd cannot be prior meet the applic	to date of filing of able statutory fi	r more than 90 da ling requiremer	ys after filing its, this date	g.) Pursu e will no	ant to 60 ot be lis	15.020 sted as
n effective dat		the Department of							
n effective date te: If the da									
n effective dat te: If the da cument's eff							he 90th	day aft	er the
n effective date te: If the da cument's effection ecord specific		fective date, but no	ot an effective t	ime, at 12:01 a.r	n. on the earlie	of: (b) T			
n effective date te: If the da cument's effe ecord specific		fective date, but no	ot an effective t	ime, at 12:01 a.r	n. on the earlier	of: (b) T			
n effective dat ote: If the da cument's effe ecord specific is filed.		fective date, but no	ot an effective t	ime, at 12:01 a.r	n. on the earlier	of: (b) T			
n effective dat ote: If the da cument's effe ecord specific is filed.		fective date, but no	ot an effective t	ime, at 12:01 a.r	n. on the earlie	of: (b) T			
in effective data ote: If the data cument's effe				ime, at 12:01 a.r					