L20000 229745

(Re	questor's Name)	
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OCT - 6 2020

COVER LETTER

Tallahassee, FL 32314

	Registration Division of C			
emp iez		NTERNATIONAL REALTY AT	ND MANAGEMENT LLC	
SUBJEC	.l:•	Name of Lim	ited Liability Company	
The encle	osed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all corres	spondence concerning this matter	to the following:	
		BENJAMIN YRASTORZ	A LELINA	
			Name of Person	
		BLYX INTERNATIONAL	L REALTY AND MANAGEMENT	LLC
			Firm/Company	
		3322 PARK AVE STE 30	2	
			Address	
		ORANGE PARK, FL 320	73	
			City/State and Zip Code	
		BENLELINA@BLYXREA		
		E-mail address: (to be used for future annual report notif	ication)
For furth	er information	n concerning this matter, please e	all:	
BENJAN	MIN YRASTO	ORZA LELINA	904 424-2082	
	Nam	e of Person	at () Area Code Daytime	Telephone Number
Enclosed	Lis a check for	r the following amount:		
	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Add Registration Division of P.O. Box 6	n Section Corporations	Street Address: Registration Sec Division of Corp The Centre of Ta	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

BLYX INTERNATIONAL REALTY AND MANAGEMENT LLC

20 Pi 6: 33

Zip Code

(A Florida Lim	ited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number L20000229745	pany were filed on JULY 31, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
•	Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9526 ARGYLE FOREST BLVD. STE B2 PMB 888
(Mailing address MAY BE A POST OFFICE BOX) STE	JACKSONVILLE, FL 32222
Name of New Registered Agent:	ice address on our records, enter the name of the new registered
New Registered Office Address:	Enter Florida street address
	Florida

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.

City

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	Benjamin Yrastorza Lelina	2233 PARK AVE	= Add
		STE 302	□Remove
		ORANGE PARK, FL 32073	□Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
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			□Remove
			□Change

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an effect <u>ote:</u> If	e date, if other than ive date is listed, the date the date inserted in the t's effective date on the	must be specific and s block does not a	d cannot be prior neet the applic	to date of filing or n able statutory filir	(option nore than 90 days after g requirements, this	filing.) Pursuant to 605.	.0207 :d as (
record s	pecifies a delayed effe	ective date, but no	t an effective ti	me, at 12:01 a.m.	on the earlier of: (b)	The 90th day after	the
ated	JGUST10		, 2020				

Typed or printed name of signee