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COVER LETTER

TO: Registration So Division of Con			
	ty Group, LLC	•	
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Cyrus Hashemi		
		Name of Person	
	Cyrus Realty Group, LLC		
		Firm/Company	
	8420 Island Palm Cir		
		Address	
	Orlando, Florida 32835		
	hashemi.cyrus67@gmail.co	City/State and Zip Code	
		to be used for future annual report notification)	
For further information c	oncerning this matter, please c	all:	
Cyrus Hashemi		407 590-3830 at ()	
Name o	rf Person	at () Area Code Daytime Telephone Number	
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)	d)
Mailing Address Registration 5		Parietration Section	7
Division of C		Division of Cornorations	
P.O. Box 632	2.7	The Centre of Tallahassee	
Tallahassee.	FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cyrus Realty Group, LLC			
(<u>Name of the Lim</u>	ited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited I	_iability Company w	ere filed on 11/20/2020	and assigned
Florida document number L20000368216			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liabili	ty company here:	
The new name must be distinguishable and contain the	words "Limited Liability	Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/or		dress on our records, enter the n	ame of the new registere
agent and/or the new registered office addre	<u>ess here</u> :		
Name of New Registered Agent:	Cyrus Hashemi		
New Registered Office Address:	8420 Island Palm		
		Enter Florida street address	C)
	Orlando	Florida	3283
		City	3283 ₹ Zip Code : 1
New Registered Agent's Signature, if changing			
I hereby accept the appointment as register	ed agent and agree	to act in this capacity. I further	agree to comply with th

provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with 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 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	<u>Address</u>	Type of Action
AMBR	Seyed M Hashemi	8420 Island Palm Cir	□Add
		Orlando, Florida 32835	■Remove
			□Change
			□Remove
			☐ Change
			□Add
			□ Remove
			☐ Change
			□Add
			□Remove
			□ Change
			☐ Remove
		·	بب
			□ Add
			□Remove
			□ Change

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	<u>.</u> .	<u>~</u>
	(optional 🖺	49
Effective date, if other than the date of filing:	than 90 days after filing.) Pursuan	n to 605.0207 (
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	-	bedisted as t
	19	्रा
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. or rd is filed.	the earlier of: (b) The 90th d	lay.after the
rd is filed.	2. Ö	
, April 7	<u> </u>	
Dated April 7 . 2021		
Signature of a member or authorized representative of	a member	
Cyrus Hashemi		