## L21000093116

(Red	questor's Name)	
(Àdo	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Dod	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

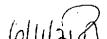
Office Use Only



300365012263

04/23/21--01015--001 \*\*25.00

78.12 29 58 2:50



## **COVER LETTER**

A company of the second

TO: Registration Division of C	Section Corporations		
SUBJECT: SWR RI	EALTY LLC		
	Name of Lia	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corre	spondence concerning this matte	r to the following:	
	George S. Savage, Esq.	Name of Person	
	The Savage Law Group, I	P.A. Firm/Company	<del>-</del>
	9050 CW 22 . 4 A		
	8050 SW 72nd Avenue A	Address	
	Miami	City/State and Zip Code	
	gss@savagelaw.net E-mail address:	to be used for future annual report not	lification)
For further information	concerning this matter, please c	rall:	
George Savage	of Person	at (305 ) 577-0000 Area Code Daytin	
. 14111	OTTERM	Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
<b>≅</b> \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration		Street Address: Registration Se	ction
Division of	Corporations	Division of Cor	
P.O. Box 63		The Centre of 7	l'allahassee
Tallahassee,	rt 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SWR REALTY LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	<del>-</del>
The Articles of Organization for this Limited Liability Company	y were filed on <u>2/25/2021</u>	and assigned
Florida document number <u>L21000093116</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liat	bility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ar- c	
		reviation "L.L.C."
Enter new principal offices address, if applicable:	6650 DYKES ROAD	
(Principal office address MUST BE A STREET ADDRESS)	SOUTHWEST RANCHES, FL 33331	
Enter new mailing address, if applicable:	6650 DYKES ROAD	
(Mailing address MAY BE A POST OFFICE BOX)	SOUTHWEST RANCHES, FL 33331	7 8
		=======================================
		<del></del>
B. If amending the registered agent and/or registered office a	address on our records, enter the name	of the new registered
agent and/or the new registered office address here:		PH
		53
Name of New Registered Agent:		্য
New Registered Office Address:		· 1
	Enter Florida street address	
	, Fiorida	
N. D. L.	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	ee to act in this canacity. I further some	a to comply with it

1 rnereny accept the appointment as registered agent and agree to act in this capacity, 1 juriner agree to comply with 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>	<u>Name</u>	Address	Type of Action
MGR	PEREZ, EDWARD	6550 DYKES ROAD	□Add
		SOUTHWEST RANCHES, FL 33331	■Remove
MGR			□Change
———	ELUH MANAGEMENT SOLUTIO	14035 NW 15th Drive	<b>=</b> Add
		Pembroke Pines, FL 33028	🗇 Remove
			□Add
	·		□ Remove
			□Add
			□Remove
			□Change
			□Add
			□Change
			□Add
			□ Remove
			□Change

_		
_		
_		
_		
_		
i an effecti <u>Note:</u> If i	e date, if other than the date of filing:  ive date is listed, the date must be specific and cannot be prior to date the date inserted in this block does not meet the applicable so t's effective date on the Department of State's records.	(optional) of filing or more than 90 days after filing.) Pursuant to 605.0207 ( tatutory filing requirements, this date will not be listed as t
	a parameter of state a records.	
record sp d is filed.	pecifies a delayed effective date, but not an effective time, at	12:01 a.m. on the earlier of: (b) The 90th day after the
	oril 28 2021	
ated <u>Ap</u>		
ated <u>Ap</u>		
ated <u>Ap</u>	Signature of a member or authorized p	presentative of a mambar