## K21000110179

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(City/State/Zip/Phone #)	
(Business Entity Name)	05/10/210102
(Document Number)	
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## **COVER LETTER**

TO: Registration Sec Division of Corp			:	*	
SUBJECT:	MC Mic	MI REALT	v 11.c.		
SUBJECT:	Name of Lin	MI REALT	1 200		
The enclosed Articles of A	Amendment and fee(s) are sul	bmitted for filing.			
Please return all correspon	idence concerning this matter	r to the following:			
	Moi	No CA CONA	1N		
	<u>Me</u>	MIAMI REAL	y LLC		
	209	900 NE	30th Ave	\$ 200	
		ITURA , FL City/State and Zip Cod			
	ERME:	S.O COHANO	GMAIL CO	1	
For further information co			•		<b>⊘</b>
ERNESTO	COHAN	ar (325)	753-3	763	= 7
Name of	Person	Area Code	Daytime Telep	hone Number	
Enclosed is a check for the	e following amount:	at ( <u>325)</u> Area Code		) A II:	J
ESS25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing For Certified Copy radditional copy is		S60.00 Filing leev. Certificate of Stat Certified Copy tadditional copy is end	tus &
<u>Mailing Address:</u> Registration Sc			Address:		
Division of Co		<del>-</del>	tration Section ion of Corporati	ions	
P.O. Box 6327	,	The C	Centre of Tallaha	assee	
Tallahaeege Fl	1 32314	2/115	N. Monroe Stre	er Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on L 21 000 110179 Florida document number 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: 5 Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MONICA CO YAN	20900 NE 30 HAVE SUIT	1200 BAdd
		Aventua, FL 331BO	□ Remove
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