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(Requestor's Name)	_
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PICK-UP WAIT A	/AIL
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T. MATTHEWS
JAN 14 2022

COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations		
		L COMPANIES LLC		
SUBJECT:		Name of Lim	ited Liability Company	
· · ·			in to gr	
The enclosed	1 Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		JOHANA CORTES		
			Name of Person	
		REAL DEAL COMPANIE	ES LLC	
			Firm/Company	
		8831 FONTAINEBLEAU	BLVD APT 309	
			Address	
		MIAMI, FL 33172		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report no	tification)
For further is	nformation c	oncerning this matter, please ea	ali:	
JOHANA C	ORTES		786 3276613	
	Name o	f Person	at () Area Code Daytir	ne Telephone Number
Enclosed is	a check for th	ne following amount:		
≘ \$25.00 I	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Re	iling Addres	Section	Street Address: Registration Se	
	vision of C D. Box 632	orporations	Division of Co The Centre of	•
	Ilahassee, I			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20.20

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REAL DEAL COMPANIES LLC

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

The Articles of Organization for this Limited Liabil	Etc. C	61 06/25/202	1	and assigned
· ·		ere med on		and assigned
Florida document number L21000295310	·			
This amendment is submitted to amend the following	лу:			
A. If amending name, enter the new name of the	e lim <u>ited liabili</u>	ty company here:		
The new name must be distinguishable and contain the words	s "Limited Liability	y Company." the designation	on "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	(DDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>			
B. If amending the registered agent and/or regis agent and/or the new registered office address h	<u>iere</u> :			
Name of New Registered Agent:	. Ticeo	2 Acquarle	>	
New Registered Office Address:	8831 F	2 Acy voi/a ontainaablaar Enter Florida stree	Bluck A.	pt 309.
	/ -	ficuni City	Florida	33172
-	<u>'</u>	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>	<u>Name</u>	Address	Type of Action
MGR	JOSE R. ACEVEDO	8831 FONTAINEBLEAU BLVD. APT 309	= Add
		MIAMI, FL 33172	□Remove
			□Change
			□Add
			□Remove
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C anti	ve date, if other than the date of filing:(optional)
fan eff <mark>Note:</mark>	ve date, if other than the date of filing:
record is fil	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
oated .	12/28/2021
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	·

Filing Fee: \$25.00