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A. BUTLER NOV 04 2021

COVER LETTER

TO:	Registration So Division of Cor						
SUBJE		up Real Estate LLC					
SUBJE	Name of Limited Liability Company						
		Amendment and fee(s) are sub	-				
		Nicholas Sultan					
			Name of Person				
		Sultan Group Real Estate I	.LC				
			Firm/Company				
		455 NE 24th Street #619					
		Address					
		Miami, FL 33137					
		sultan, nicholas@gmail.com	City/State and Zip Code				
		E-mail address: (to be used for future annual report notification)					
For furth	her information o	concerning this matter, please co	all:				
Nichola	s Sultan		954 552-0959 at()				
	Name (of Person	Area Code Days	ime Telephone Number			
Enclose	d is a check for t	he following amount:					
■ \$25	.00 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)			
	Mailing Addres	<u>>>:</u>	Street Address:				

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILE D OF

2021 OCT 22 PH 1:39

Sultan Group Real Estate LLC	20	2.00.2
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on o tability Company)	TALLAMADSET, EL
he Articles of Organization for this Limited Liability Company	were filed on	21 and assigned
lorida document number 1.21000396883		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designa	tion "LLC" or the abbreviation "L.L.C."
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 a gent and/or the new registered office address here:	ddress on our record	s, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	ret auktress
		. Florida
	City	Zip Code
		
New Registered Agent's Signature, if changing Registered Agent:		

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	Daniela Sanchez	455 NE 24th Street #619	■Add
		Miami, Fl 33137	□Remove
			□ Change
			□Add
			Remove
			☐ Change
			_ _ _ _ _ _ _ _ _ _ _ \
			Remove
			Change
			Remove
			☐ Change
		,	□Remove
			Change
			□Add
			Remove
		*****	□Change

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If an eff Note:	ive date, if other than the date of filing:
e recor rd is ti	d 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 led.
Dated	Signature of a member or authorized representative of a member
	m W
	Signature of a member or authorized representative of a member Nicholas Sultan