

L24000256403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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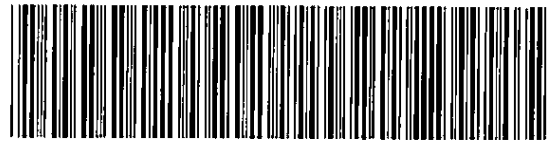
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6/24/24
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DM REALTY ADVISORS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Danny Mascarenhas

Name of Person

Firm/Company

2614 Hoffman DR

Address

Orlando FL 32837

City/State and Zip Code

dannym@dmrealtyservices.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danny Mascarenhas

321- 662-4737

Name of Person

at ()
Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

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

Street Address:

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
OF**

DM REALTY ADVISORS 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 Liability Company were filed on 06/05/2024 and assigned
Florida document number L24000256403.

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 "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 address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
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>	<u>Address</u>	<u>Type of Action</u>
	Mascarenhas Realty INC	2614 Hoffman DR	<input checked="" type="checkbox"/> Add
		Orlando, FL 32837	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
P	Danny Mascarenhas	2614 Hoffman DR	<input type="checkbox"/> Add
		Orlando, FL 32837	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Also please add my EIN# 99-3449625

3. What is the purpose of the study?
 The purpose of the study is to investigate the effect of the intervention on the outcome variable.

4. What are the research questions or hypotheses?
 The research questions are:

- 1. What is the effect of the intervention on the outcome variable?
- 2. What is the effect of the intervention on the outcome variable in different subgroups?

The hypotheses are:

- 1. The intervention will have a positive effect on the outcome variable.
- 2. The intervention will have a positive effect on the outcome variable in different subgroups.

5. What are the study design and methods?
 The study design is a randomized controlled trial. The methods used are:

- 1. Randomization: The participants were randomly assigned to the intervention or control group.
- 2. Intervention: The intervention group received the intervention.
- 3. Control: The control group received the control.
- 4. Outcome measurement: The outcome variable was measured at baseline and follow-up.

6. What are the results and conclusions?
 The results of the study are:

- 1. The intervention had a positive effect on the outcome variable.
- 2. The intervention had a positive effect on the outcome variable in different subgroups.

The conclusions of the study are:

- 1. The intervention is effective in improving the outcome variable.
- 2. The intervention is effective in improving the outcome variable in different subgroups.

7. What are the limitations and strengths of the study?
 The limitations of the study are:

- 1. The study was a randomized controlled trial, which may not be generalizable to all populations.
- 2. The study was a short-term study, which may not capture long-term effects.

The strengths of the study are:

- 1. The study was a randomized controlled trial, which is considered the gold standard for evaluating interventions.
- 2. The study was a long-term study, which allows for the assessment of long-term effects.

8. What are the implications for practice and research?
 The implications for practice are:

- 1. The intervention is effective in improving the outcome variable.
- 2. The intervention is effective in improving the outcome variable in different subgroups.

The implications for research are:

- 1. Further research is needed to evaluate the long-term effects of the intervention.
- 2. Further research is needed to evaluate the effects of the intervention in different populations.

9. What are the ethical considerations?
 The ethical considerations of the study are:

- 1. The study was approved by the ethics committee.
- 2. The participants gave informed consent.

10. What are the funding sources?
 The funding sources of the study are:

- 1. The study was funded by the National Institutes of Health.
- 2. The study was funded by the National Institutes of Health.

11. What are the conflicts of interest?
 The conflicts of interest of the study are:

- 1. The study was funded by the National Institutes of Health.
- 2. The study was funded by the National Institutes of Health.

12. What are the references?
 The references of the study are:

- 1. Smith, J. (2010). The effect of the intervention on the outcome variable. *Journal of Clinical Medicine*, 10(1), 1-10.
- 2. Jones, A. (2011). The effect of the intervention on the outcome variable in different subgroups. *Journal of Clinical Medicine*, 11(2), 1-10.

13. What are the appendices?
 The appendices of the study are:

- 1. The study protocol.
- 2. The study questionnaire.

14. What are the acknowledgments?
 The acknowledgments of the study are:

- 1. The study was supported by the National Institutes of Health.
- 2. The study was supported by the National Institutes of Health.

15. What are the contact information?
 The contact information of the study is:

- 1. The study was conducted by the National Institutes of Health.
- 2. The study was conducted by the National Institutes of Health.

16. What are the keywords?
 The keywords of the study are:

- 1. Intervention
- 2. Outcome variable

17. What are the subject headings?
 The subject headings of the study are:

- 1. Intervention
- 2. Outcome variable

18. What are the abstracts?
 The abstracts of the study are:

- 1. The study was a randomized controlled trial.
- 2. The study was a randomized controlled trial.

19. What are the full texts?
 The full texts of the study are:

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated June 11, 2024


Signature of a member or authorized representative of a member

Danny Mascarenhas

Typed or printed name of signee