# LD700008137

(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Bosument rumser)				
Certified Copies Certificates of Status				

Special Instructions to Filing Officer:

L. SELLERS

OCT 27 2011

**EXAMINER** 

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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# **COVER LETTER**

Division of Co						
<b>Ş</b> ЫВЈЕСТ:	CHOICE ONE REALTY, LLC					
<u></u>		ited Liability Company				
	f Amendment and fee(s) are su	-				
Please return all corresp	ondence concerning this matte	r to the following:				
	GREGOR GRAEFF					
Name of Person						
CHOICE ONE REALTY, LLC						
Firm/Company						
	8823 WINDSOR POINTE DR					
	Address					
	ORLANDO, FL 32829					
	City/State and Zip Code					
	GREGGRAEFF@GMAIL.COM  E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please o	call:				
GRE	GOR GRAEFF	at (_407_)	619-8555			
Name of Person Area Code & Daytime Telep		ne Telephone Number				
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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/COURIER ADDRESS:

Registration Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	CHOICE ONE REALTY, LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.  Liability Company)				
The Articles of Organization for this Limited Liability Company	were filed on and assigned				
Florida document numberL0700083137					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	pility company here:				
NATIONAL RELIAN					
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation				
Enter new principal offices address, if applicable:	121 S ORANGE AVE				
(Principal office address MUST BE A STREET ADDRESS)	SUITE 1500				
	ORLANDO, FL 32801				
Enter new mailing address, if applicable:	8823 WINDSOR POINTE DR				
(Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32829				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her  Name of New Registered Agent:  New Registered Office Address:					
New Registered Office Address:	Enter Florida street and sss 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
	b City				

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = M $MGRM =$	lanager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
<del></del>			Add Remove
			Add Remove
D. If ame	nding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
_			
_			
Dated	OCTOBER 25TH , 20	<u>11                                   </u>	
	Signature of a member	or authorized representative of a member	<del></del>
		EGOR GRAEFF or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00