Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEOPOLD KORN & LEOPOLD, P.A.

Account Number : I20010000025

Phone : (305) 935-3500

Fax Number

: (305)935-9042

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.** Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN REO TITLE COMPANY OF FLORIDA, LLC

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EXAMINER

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REO TITLE COMPANY	OF FLORI	DA, LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appea ability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Company w	vere filed on	09/05/2008	and assigned	
Florida document numberL08000084886		,		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ity company her	Ē:		
The new name must be distinguishable and end with the words "Limite" L.L.C."	d Liability Compa	nry," the designation "I	LLC nor the	abbreviation
Euter new principal offices address, if applicable:			ร้อง วิสร์ ราการทำ	Die.
(Principal office address MUST BE A STREET ADDRESS)			672	
			32	
Enter new mailing address, if applicable:			ES.	32 C
(Mailing address MAY BE A POST OFFICE BOX)			75	<u>67)</u>
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on o	ur records, enter t	he name o	f the new
Name of New Registered Agent:	_			<u>.</u>
New Registered Office Address:	Enl	er Florida street addi	ress	
		. Florida		
	City	, A 101 1112	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 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 Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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:

MGRM = Managing Member Type of Action <u>Title</u> <u>Address</u> Name MGR BEN-EZRA & KATZ, P.A. 2901 Stirling Road, Suite 300 □ Add √ Remove Ft. Lauderdale, El. 33312 □ Add Remove ∏ Add Remove 至_第 行**A**dd Remove ∏Add ☐Remove **መ**ጉ ∐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 2 Dated_ Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Karen S. Leopold

Filing Fee: \$25.00