

L09000040877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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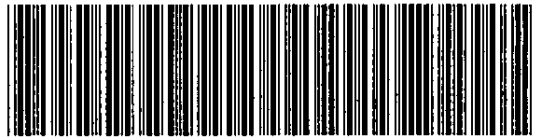
(Business Entity Name)

(Document Number)

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2009 JUL 20 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

JUL 21 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Eastshore Realty Group, 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:

Jeffrey D. Ostlie

Name of Person

Eastshore Realty Group, LLC

Firm/Company

3899 W Lake Mary Blvd

Address

Lake Mary, FL 32746

City/State and Zip Code

jeffostlie@cfl.rr.com

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

For further information concerning this matter, please call:

Jeffrey Ostlie

Name of Person

at (407)

690-6160

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/COURIER ADDRESS:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

2009 JUL 20 PM 2:43

Eastshore Realty Group, LLC

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/28/2009 and assigned
Florida document number L09000040877.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7575 Dr. Phillips Blvd., Suite 250

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32819

Enter new mailing address, if applicable:

3899 W. Lake Mary Blvd Suite 123

(Mailing address MAY BE A POST OFFICE BOX)

Lake Mary, FL 32746

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:

Jennifer Dollar

New Registered Office Address:

3899 W Lake Mary Blvd Suite 123

Enter Florida street address

Lake Mary

, Florida

32746

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 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.

Jennifer Dollar
If Changing Registered Agent, Signature of New Registered Agent

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 = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Jeffrey D. Ostlie	1430 NE 55th Street Fort Lauderdale, FL 33334	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Robert Tenaglia	7575 Dr. Phillips Blvd., Suite 250 Orlando, FL 32819	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Mahmoud Sabrkhani	500 State Rd 436, Suite 2018 Casselberry, FL 32707	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____



Signature of a member or authorized representative of a member

Jeffrey D. Ostlie

Typed or printed name of signee

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 TALLAHASSEE, FLORIDA