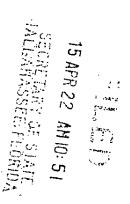
## 47 0000 74517

Office Use Only



400271964494

04/22/15--01010--001 \*\*25.00



Natives both & C and

## **COVER LETTER**

TO:	Registration Sec Division of Corp	etion porations <sup>©</sup>					
	BRH Rea	alty Group LLC					
SUBJE	CI:	Name of Limited Liability Company					
The end	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.				
Please 1	eturn all correspor	ndence concerning this matter	to the following:				
		Ronald S. Booth					
			Name of Person				
		BRH Realty Group,	LLC				
			Firm/Company				
		P.O. Box 1202					
			Address				
		Winter Haven, Florid	da 33882-1202				
		4000@h-t	City/State and Zip Code				
		ynnor1202@hotmail. E-mail address: (t	com to be used for future annual report notific	ation)			
For furt	her information co	oncerning this matter, please ca	all:				
Rona	ld S. Booth		863 258-3002	•			
	Name of	Person		Celephone Number			
Enclose	ed is a check for th	ne following amount:					
\$25	5.00 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

BRH Realty Group, LLC		
(Name of the Limited Liability (A Florida	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number <u>L13000034597</u>		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
Booth-Herbert & Co. LLC		
The new name must be distinguishable and end with the words "Lim	ited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
(a timespa, office dataress lines   BE   BI   BI   BE		
	-	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		20
B. If amending the registered agent and/or registe		he name of the new
registered agent and/or the new registered office addre	ess here:	TPR
		CO TO FORM
Name of New Registered Agent:		
N D 1000 - A 11		
New Registered Office Address:	Enter Florida street address	Se 5
	, Florida	Zin 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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

ē,

<u>Title</u>	Name	Address	Type of Action
MGR	WGR RE Consulting &	4090 Horse Creek Blvd.	Add
	INVESTMENT, INC.	Ft. Myers, Florida 33905	Remove
		- · · · · · · · · · · · · · · · · · · ·	<b>[]</b> A 11
			☐ Remove
		<u> </u>	Add
		<del></del>	Remove
			Add
			□ Remove
			Remove
			□ Remove

•	
• • •	
<del></del>	
Effective date, if other than the date of filing the effective date must be specific, cannot be prior to date this document is filed by the Florida Department	ate of receipt or filed date and cannot be more than 90 days after
Pated April 20	2015
· anco	,
Kun al	· Roots
Lmuff Signature of a	member or authorized representative of a member
Ronald S. Booth	member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

PACLYNY SECTERATE