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PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	

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L. SELLERS

FEB -7 2008

EXAMINER

Office Use Only

SEORE TARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Elite Brokers Real Estate Group, LIC (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:						
Jacqueline Ballard (Name of Person)						
Elite Brokers Real Estate Group, UC (Firm/Company)						
38008 Live Oak Avenue, Suitele						
Dade City, FL 33523 (City/State and Zip Code)						
For further information concerning this matter, please call:						
(Name of Person) at (813) 713-5604 (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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

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."
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:

38008 Live Oar Avenue

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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 Rogister	ed Avent)	_
	.CRETARY LAHASSE	8FEB-6	
Page 1 of 2	OF STATE E. FLORID,	PH 4: 25	

(Enter Florida street address)

Florida

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = M MGRM =	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			AddRemove
			Add Remove
		nge(s) here: (Attach additional sheets, if nece	essary.)
	Jailing address:		
		enue	
	Suite le Sade City, Florida	2 33523	
Dated <u>\</u>	Fray B Da	per of authorized representative of a member	
	Gregory B. De	1 - 60 - 6	2008 FEB -6
	-	Page 2 of 2	[1]
		Filing Fee: \$25.00	