## L01000000512

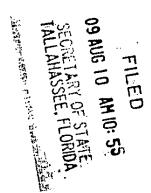
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**EXAMINER** 

## **COVER LETTER**

TO:

Registration Section

'Division of	Corporations				
вивлест: Realvest Development, LLC					
	Name of Lin	nited Liability Company			
The enclosed Article	s of Amendment and fee(s) are su	ubmitted for filing.			
Please return all corre	espondence concerning this matte	er to the following:			
			•		
		Richard A. Asta			
		Name of Person	OS NIG 10 MID: 55		
Realvest Development, LLC					
Firm/Company					
<b>3 3 3 3 3 3 3 3 3 3</b>					
	2200 Lucien Way, Suite 350  Address				
		,	OR TO		
	Maitland, FL 32751				
		City/State and Zip Code	100 m		
	F mail addrage	rasta@realvest.com (to be used for future annual report notification)	<del>_</del>		
<b>5</b>		· ·	,		
For further information	on concerning this matter, please	call:			
	Richard A. Asta	at ( 407 ) 875-9989			
Naı	me of Person	Area Code & Daytime Telephone Nu	mber		
Enclosed is a check f	or the following amount:				
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	0 Filing Fee, ificate of Status & ified Copy litional copy is enclosed)		
Re <sub>j</sub> Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, FL 32314	STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF ALLAHASSEE, FLORIDA Ords.)

Realvest Development, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 1-10-2001 The Articles of Organization for this Limited Liability Company were filed on and assigned L01000000512 Florida document number 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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 = Manager MGRM = Managing Member

Title '	<u>Name</u>	Address	Type of Action
MGRM	George D. Livingston	2200 Lucien Way Suite 350 Maitland, FL 32751	Add Remove
MGRM_	Properties, UC	2200 Lucien Way Suite 350 Maitland, FL 32751	Remove
			Add Remove
			Add Remove
	<u> </u>		□ D amanua
			Add Remove
D. If amen	ding any other information, enter cha	ange(s) here: (Attach additional sheets, if necess	ary.)
Dated	August 5	2009 2/12/	
	Signature of a men	nbar or authorized representative of a member	
	(	George D. Livingston	
	Ту	ped or printed name of signee	<del>-</del>

Page 2 of 2

Filing Fee: \$25.00