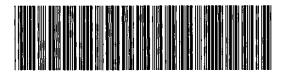
L01000001050

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		P
	Office Use On	ilv

B. KOHR MAY 17 2012 EXAMINER



300234653283

05/16/12--01002--008 **25.00



COVER LETTER

то:	Registration S Division of Co				
SUBJECT: 8465 Realty, LI			Realty, LLC		
50.50			ted Liability Company		DEN 16
The en	closed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		12 出7 16 图 346
		Maria C. Arriola Velez		416	
			Name of Ferson	,	
Ma		ria C. Arriola Velez PA			
			Firm/Company		
		35 Almeria Avenue			
			Address		
		C	oral Gables, FL 33134		
			City/State and Zip Code		
		MVel	ez@velezlawoffices.com to be used for future annual report no	ortification)	
For fur	ther information	concerning this matter, please of			
	Maria	C. Arriola Velez	at (_305_)_	461-9223	
	Name	of Person		time Telephone Number	
Enclos	ed is a check for	the following amount:			
\$25	5.00 Filing Fee	\$30,00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	\$60.00 Filing Fee, Certificate of Status sed) Certified Copy (additional copy is 6	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle		

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

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

Page 1 of 2

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>	Address	Type of Action
MGR	Philip Snyder	7888 Trieste Place Delray Beach, FL 33446	Add Remove
MGR_	Libby Snyder	7888 Trieste Place Delray Beach, FL 33446	Add Remove
			Add Remove
			Add Remove
			Add Remove
.		·	Add Remove
D. If ame	nding any other informatio	on, enter change(s) here: (Attach additional sheets, if necessary.)
-			
,			
Dated	May 4	<u>2012</u> .	
	<u> Lefefry</u> Signal	ture of a member or authorized representative of a member	
	213944	Libby Snyder	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00