## L01000003410

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**EXAMINER** 

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## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

SUBJECT: F	Paradise Appraisals & Name of Limit	Real Estate Served Liability Company	rices, LLC	_	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing			
The enclosed Afficies o	i Amenument and reces) are sub-	mitted for filling.			
Please return all corresp	ondence concerning this matter	to the following:			
ì				201 FA	
	Lyn Ciaffone			-7	
		Name of Person		2010 JAN 15 SECRETAR TALLAHASS	-
	<b>-</b> 0.4			IARY ASSEI	一下「「
	Tax & Accounting of Southwest Florida, LLC Firm/Company				Γ
		rum/Company		اند ا اند اند اند اند اند اند اند اند اند اند	C
	809 Walkerbilt Road, Suite 6			PM 3: 57 OF STATE EE. FLORIDA	
	<del></del>	Address		_ <del>}</del>	
		Naples, FL 34110		_	
		City/State and Zip Code			
	F-mail address: (tr	lync@taswfl.com  be used for future annual repe	ort notification)	_	
		•	on nonneadon,		
For further information	concerning this matter, please ca	all:			
ı	yn Ciaffone	at ( 239 )	449-4881		
Name of Person			Daytime Telephone Numl	ber	
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 en	Certifi nclosed) Certifi	Filing Fee, icate of Status & ied Copy ional copy is enclosed)	İ

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

Paradise Apprais	als & Real Estate Se	ervices, LLC	
( <u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appe da Limited Liability Company	ars on our records.) )	
The Articles of Organization for this Limited Liability	• •	March 6, 2001	and assigned
Florida document number L01000004810	·		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company he	<u>ere</u> :	
			20 TA S
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Com	pany," the designation "	語 w T
Enter new principal offices address, if applicable:	<del></del>		SSA T
(Principal office address MUST BE A STREET AD	DRESS)		me z
Enter new mailing address, if applicable:			1 3: 58 - SAIE - ORIDA
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office a		our records, enter	the name of the new
Name of New Registered Agent:			
New Registered Office Address:		Suton Florida atnast ada	
	Enter Florida street address		
	City	, Florida	Zip Code
	City		Lip 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.

If Changing Registered Agent, Signature of New Registered Agent

M 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>	Type of Action
MGR_	Paradise Appraisals	& 2300 Guadelupe Drive Naples, FL 34119	✓ Add ☐ Remove
MGR_	Paradise Appraisals Estate Service	& Real 2300 Guadelupe Drive S, LLC Naples FL 34119	
	<del> </del>		Add Remove
			Add Rentage
			HASSEE FLORID
D. If amen	ding any other information,	enter change(s) here: (Attach additional she	Remove
<u>E</u>	ffective date: January 1	2010	
 Dated	January 4		<del></del>
	0.	77/7/4	1.4.10
	Signatur	e of a member or authorized representative of a me Michael Manganaro	ember
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00