

L62000006417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

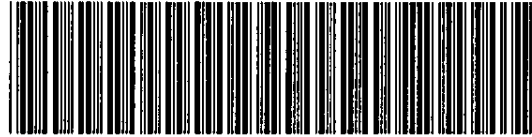
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13 FEB -6 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASSISTED LIVING REALTY INCOME PROPERTIES, LLC

Name of Limited Liability Company

and Reinstatement

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alan B. Schneider, Esq.

Name of Person

Alan B. Schneider, P.A.

Firm/Company

PO Box 14276

Address

Fort Lauderdale, FL 33302

City/State and Zip Code

alan.schneider.esq@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alan B. Schneider, Esq.

at (954) 893-6868

Name of Person

Area Code & Daytime Telephone Number

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 enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

* \$932.50 -
Reinstatement Fee

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

FILED
13 FEB -6 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ASSISTED LIVING REALTY INCOME PROPERTIES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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13 FEB -6 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 3/19/2002 and assigned
Florida document number L02000006417.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ASSISTED LIVING REALTY NO.1, LLC

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)

c/o Alan B. Schneider, Esq.

633 South Federal Hwy., 8th Fl

Fort Lauderdale, FL 33301

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 14276

Fort Lauderdale, FL 33302

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:

Alan B. Schneider, Esq.

New Registered Office Address:

633 South Federal Highway, 8th Floor

Enter Florida street address

Fort Lauderdale

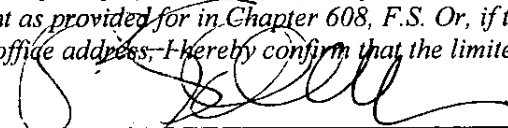
, Florida 33301

City

Zip 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**

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>	<u>Address</u>	<u>Type of Action</u>
MGR	PHAM, ANDY	6040 S. DURANGO DR., SUITE 105	☒ Add
		LAS VEGAS, NV 89113	☐ Remove
MGR	PHAM, ANDY	22144 CLARENDON ST 240	☐ Add
		WOODLAND HILLS, CA 91367	☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated February 4, 2013

Signature of a member or authorized representative of a member

ANDY PINK

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00