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D. BRUCE NOV 0 2 2012 EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations  SUBJECT: Registration Section  Openty Extermises LLC  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:
Real Property Entermises LLC  Firm/Company  P.D. Box 244331  Address  Baynton Beach, \$1 33424  City/State and Zip Code  Fammur @ Yahoo. con  E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Omari Muray at (561) 251 2319  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 & Certificate of Status Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & 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**

Real Property Enterprises, LLC			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L0200035117.	and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and end with the words "Limi "L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	ited Liability Company," the designation "L	LC" or the LL AHASSEE. F	AND
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		F STATE FLORIDA	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street ada	hress	
	, Florida		
···	City	7in 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 **Title Type of Action** Remove ☐ Remove ☐ Add Remove Remove ∐Add Remove Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee