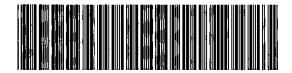
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(Address)					
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S. HAWKES

SEP 1 4 2010

EXAMINER

COVER LETTER

Division of Co	orporations					
SUBJECT:	Landmark Inves	stment Properties, LLC				
		ited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sul	omitted for filing.				
Please return all corresp	condence concerning this matter	to the following:				
		Donald Alford				
		Name of Person				
	Landmar	Landmark Investment Properties, LLC				
	Firm/Company					
		337 S Point Ct				
	Address					
	Sa	Satellite Beach, FL 32937				
	City/State and Zip Code					
	E-mail address: (dalford@cfl.rr.com to be used for future annual report notificati	on)			
For further information	concerning this matter, please of					
	Same	at (321) 77	7-6097			
Name	of Person	Area Code & Daytime Te	lephone 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAII	LING ADDRESS:	STREET/COURIER	ADDRESS:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Landmark Investment Properties LLC

· (Name of the Limited	Liability Compa	ny as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited L	iability Company	were filed on	11/04/2003	and assigned
Florida document number L0300004	2664		Ţ.	10000000000000000000000000000000000000
This amendment is submitted to amend the foll	lowing:		,	SEP 13 PK
A. If amending name, enter the new name of	f the limited liab	oility company here	2:	RA SA
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Compar	ny," the designation "I	LE the Boreviation
Enter new principal offices address, if applicable:		337 S Point C	t.	
(Principal office address MUST BE A STREET ADDRESS)		Satellite Beac	h, FL 32937	
		 		
Enter new mailing address, if applicable:	337 S Point C	t.		
(Mailing address MAY BE A POST OFFICE BOX)		Satellite Beac	h, FL 32937	
B. If amending the registered agent and/registered agent and/or the new registered o	ffice address her	e:	ur records, <u>enter t</u>	he name of the ne
New Registered Office Address:	337 S Point		er Florida street ada	ress
	Sa	tellite Beach	, Florida	32937
		City	, FIOTIUM	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 amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM	MGRM = Managing Member					
Title	<u>Name</u>	Address	Type of Action			
			Add Remove			
			Add Remove Add Remove			
D. If an	nending any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	Add Remove			
	Address Changes for the following 2	2 MGRM				
	Donald R Alford 337 S Point Ct. Sa	atellite Beach, FL 32937	<u> </u>			
	Mary L Alford 337 S Point Ct. Sate	ellite Beach, FL 32937	<u> </u>			
	Other MGRM addresses are unchar	nged	_			
Dated _	September 9 , 2	010 .				
	Signature of a member	er or authorized representative of a member				
	Donald R Type	d or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00