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T. HAMPTON

OCT - 5 2009

EXAMINER

COVER LETTER

		•		•	•
SUBJE	CT:	REALTY C	ONNECTION, LLC		
		Name of Lim	ited Liability Company		
The enc	losed Articles of Amendme	nt and fee(s) are su	bmitted for filing.		
Please r	eturn all correspondence co	ncerning this matte	r to the following:		
		,	VICTOR ALVARADO		
			Name of Person		
		REA	LTY CONNECTION, L	LC	
			Firm/Company		
		4981	BRIGHTMOUR CIRC	CLE	
			Address		
		(ORLANDO, FL 32837		
			City/State and Zip Code	-	
		E-mail address:	vicalv@bellsouth.net (to be used for future annual repo	rt notification)	
For furt	her information concerning		•	,	
	VICTOR ALV	ARADO	at (_407_)	574 4	339
	Name of Person	110100	Area Code &	Daytime Telepho	
Enclose	d is a check for the following	ng amount:			
	00 Filing Fee \$30.	00 Filing Fee & rtificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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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

Y CONNECTION, LL	.C	
llity Company as it now appea da Limited Liability Company)	rs on our records.)	
y Company were filed on	02/27/2004	and assigned
;		
imited liability company he	<u>re</u> :	
words "Limited Liability Comp	any," the designation "I	LC" or the abbreviati
DRESS)		09 00 151051
		7 -2
		PA PA
		STA ORAL
	our records, <u>enter t</u>	he name of the n
Enter Florida street address		
City	, Florida	Zip Code
	da Limited Liability Company) y Company were filed on y Company were filed on imited liability company he words "Limited Liability Comp DRESS) gistered office address on ddress here:	imited liability company here: words "Limited Liability Company," the designation "I DRESS) gistered office address on our records, enter t ddress here: Enter Florida street add , Florida

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	EARTHBENDER, LLC	8624 TERRACE PINES CT ORLANDO FL 32836 US	Add Remove
MGRM_	CLAUDIA QUINTERO	8624 TERRACE PINES CT ORLANDO FL 32836 US	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, e	nter change(s) here: (Attach additional sheets, if necessal	SEGRETARY SIVISION OF C 09 OCT -2
Dated	SEPTEMBER 30	, 2009 . J. J	PH 12: 00
	Signature of	of a member or authorized representative of a member	
		VICTOR ALVARADO Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00