404000065214

(Re	equestor's Name)	
•		
(Ad	ldress)	_
	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
(Oil	y o to to repri Trotte	· · · · · · · · · · · · · · · · · · ·
PICK-UP	☐ WAIT	MAIL
		·
. (Bu	isiness Entity Nar	ne)
· (Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	۸	. LUNT
		i
	SE	EP 1 6 2010
	EV	ARBERT

100184959771

09/15/10--01005--018 **50.00

ZIII SEP 15 PH 3: 31
SEGRETARY OF STATE
TALLAHASSEE, FINANCE

EXAMINE

Office Use Only

COVER LETTER

10:	Registration S Division of Co					
SUBJE	CT:	360 Rea	alty Group LLC			
3000	.c.r		ted Liability Company			
The end	closed Articles of	`Amendment and fee(s) are sub	omitted for filing.			
Please	return all correspo	ondence concerning this matter	to the following:			
	Anita Sandel					
	Name of Person				en 2	
		360 Realty Group LLC		ZIII SEP 15 PM 3: SEURETARY OF STA TALLAHASSEE FLOO		
	Firm/Company			EAS.	9 :- 	
	3485 S. Monroe Street			}} •••		
		Address			_	
	-	Т	Tallahassee, Fl. 32301			
		City/State and Zip Code				
	-	anita@r E-mail address: (northlandmanufacturing.com to be used for future annual report notifi	cation)		
For fur	ther information	concerning this matter, please o	eall:			
Anita Sandel _			at \	878-5149		
	Name	of Person	Area Code & Daytime	: Telephone Numbe	r	
Enclos	ed is a check for	the following amount:				
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status		\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)) Certifie	ate of Status &	
	Regis Divisi P.O. E	tration Section on of Corporations Box 6327 bassee, FL 32314	STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle		

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

360 Realty 6	vous LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears o Liability Company)	n our records.)	· · ·
The Articles of Organization for this Limited Liability Company	were filed on	09/01/2004	and assigned
Florida document numberL0400065214			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and end with the words "Limi" "L.L.C."	ited Liability Company,	" the designation	A+++4
Enter new principal offices address, if applicable:	3485 S. Monroe	Street	2010 S
(Principal office address MUST BE A STREET ADDRESS)	Tallahassee, Fl.	32301	SEP IS
- 	-		CF SH & C
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			100 H 32
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		records, ente	r the name of the r
Name of New Registered Agent:			
New Registered Office Address:			
	Enter	Florida street a	address
-		, Florida	
	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 Title <u>Name</u> <u>Address</u> Type of Action MGR Delories A. Greene 1189 Stoney Creek Way ✓ Add Tallahassee, Fl. 32317 Remove ☐ Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2010 Dated_ Signature of a member or authorized representative of a member Anita Sandel

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00