## L05000028636

(Requestor's Name)						
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(Cit	ty/State/Zip/Phone	e #)				
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(Business Entity Name)						
(Document Number)						
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J. SAULSBERRY EXAMINER SEP 0 8 2011

## **COVER LETTER**

10:	Division of Co					
SUBJE	CT:	Phil Kearne	ey Real Estate LLC			
002013	Name of Limited Liability Company					
The end	elosed Articles of	f Amendment and fee(s) are su	bmitted for filing.			
Please r	eturn all corresp	ondence concerning this matte	r to the following:			
			Philip Kearney			
			Name of Person			
		Phil	Kearney Real Estate LL0			
			Firm/Company			
		167 Shell Falls Dr				
			Address		20 TAL SI	
		Α	pollo Beach, FL 33572		2011 SEP – SECRETAR ALLAHASS	7
			City/State and Zip Code		TAR	
		E-mail address: (	pkflorida@aol.com to be used for future annual report r	notification)	7 A Y OF	
For furt	her information	concerning this matter, please			AH 9:57 DESTATE FLORIDA	
		hilip Kearney	at ( 813 )	753-8763		
	name	of Person	Area Code & Day	ytime Telephone Number		
Enclose	ed 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 enclo	osed) Certified	te of Status &	sed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COU Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, FL	rporations g e Center Circle			

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

( <u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appeared Liability Company)	rs on our re	cords.)		
The Articles of Organization for this Limited Liability Compa Florida document numberL0500028636	nny were filed on	4/18/2	2011	and ass	igned
This amendment is submitted to amend the following:				•	PK
A. If amending name, enter the new name of the limited li	iability company her	<u>∙e</u> :	0 11	_	
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited li  Sun Re  The new name must be distinguishable and end with the words "L  "L.L.C."	imited Liability Compa	<u>υμη</u> iny," the des	<b>Nea / Ty</b> Signation "LL <b>C</b>	or the a	bbreviation
Enter new principal offices address, if applicable:					<u>.</u> .
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>		— <del>Z</del> se	8	
	<del></del>		CRETAI AHAS	- 43 <u>S</u>	<u> </u>
Enter new mailing address, if applicable:			—————————————————————————————————————	7	5
(Mailing address MAY BE A POST OFFICE BOX)			) FST	<u>A</u> # 9:	
			RDA DA	57	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		our record	s, enter the	name o	of the new
Name of New Registered Agent:					
New Registered Office Address:		771			
	· – En	ter Florida	street address	5'	
	, Florida				
	City		2	Zip Code	3

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> **Type of Action** Address . ☐ Add Remove ☐ Add ☐ Add Remove ☐ Add Remove  $\square$ Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Name change only. Dated \_\_\_\_ August 26 2011 a member or authorized representative of a member

Philip L. Kearney
Typed or printed name of signee

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Filing Fee: \$25.00