405000048080

<u> </u>	(Requestor's Name)
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PICK-U	P WAIT MAIL
	(Dusiness Entity Name)
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status

Special Instructions to Filing Officer:

A. LUNT

APR 12 2011

EXAMINER

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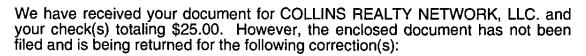


April 11, 2012

RON COLLINS 1160 KANE CONCOURSE SUITE 301 BAY HARBOR ISLAND, FL 33154

SUBJECT: COLLINS REALTY NETWORK, LLC.

Ref. Number: L05000048080



A brief description of the entity's nature of business must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II •

Letter Number: 712A00011594

COVER LETTER

TO: Registi Divisio	ration Section on of Corporation	s			
SUBJECT:	С	OLLINS REA	LTY NETWORK, L	LC.	
SUBJECT	-		ited Liability Company		
		ent and fee(s) are sul	_		
			Dan Calling		
			Ron Collins Name of Person		- B
					7
•	<u> </u>	COLLIN	S REALTY NETWOR	K, LLC.	2812 APR II
		•	Firm/Company		State of the state
		, 1160 k	(ane Concourse Suite	e 301	
	-		Address		
		David	Harbar lalanda El 22	454	1
		Вау	Harbor Islands, FL 33 City/State and Zip Code	154	
•			ron@collins.pro		
		E-mail address: (to be used for future annual repo	ort notification)	
For further infor	mation concerning	g this matter, please o	eall:		
	Ron Col	lins	at (305)	467-900	00
	Name of Person			Daytime Telephone	e Number
Enclosed is a ch	eck for the follow	ing amount:			
₹25.00 Filing	g Fee \$30	.00 Filing Fee & ertificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	nclosed)	60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
• '	MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations	Registration Division of Clifton Buil	Corporations ding tive Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NETWORK, LLC. Inv as it now appears on our Liability Company)	r records.)		
were filed on05/	16/2005	and assi	gned
oility company here:			
s, PLLC			
ited Liability Company," the	designation "L	LC" or the al	obreviation
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Aventura, FL 33180)	<u> </u>	princati plik
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Ron Collins, PLLC_			persons 4
PO Box 546948	<u>1</u>	<u> </u>	
Miami Beach, FL 33	3154-6948 [‡]	<i>f</i> 1	
ffice address on our rec	ords, <u>enter tl</u>	ne name of	the new
avne Blvd Suite 101			
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Aventura	. Florida	33180	
City		Zip Code	
	ny as it now appears on our clability Company) were filed on	ny as it now appears on our records.) Jability Company) were filed on	were filed on

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, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

	<u>Name</u>	Address	Type of Action
			Add Remove
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D. If amend		e(s) here: (Attach additional sheets, if necessar	
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 Dated	April 10 / , / 20	1 2 / _{1/1}	

Page 2 of 2

Filing Fee: \$25.00