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(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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D. BRUCE
JUN 21 2011
EXAMINER

COVER LETTER

TO:	Registration S Division of Co						
SUBJE	CCT: <u>Diversi</u>	fied Real Estate Name of Limi	Ventures, LCC ited Liability Company				
The end	closed Articles of	Amendment and fee(s) are sul	omitted for filing.				
Please	return all correspo	ondence concerning this matter	to the following:				
		David B	Rhinghart Name of Person				
		Diversified	Real Estate Vontures	uc	~ · · · · · · · · · · · · · · · · · · ·		
		3616 Harden B	Nvd #208 Address		SCUREJAR VLLAHASS	11 JUN 20	
		Lakeland, FL	33803 City/State and Zip Code		Y OF STATE	AM NA	m
		Grevile @ E-mail address: (1	amail. (om	ation)	TANE ORIDA	\$ 52	
For furt	her information o	concerning this matter, please c	all:				
\supset	avid B. Name o	Rhine hart of Person	at (863) 660-4223 Area Code & Daytime	3 Telephone Number			
Enclose	d is a check for the	he following amount:	•				
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Fili Certificat Certified (additions	te of Stati Copy		sed)

MAILING ADDRESS:

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

Diversified Real	Estate	Ventures, LL	<u>د</u>	
(Name of the Limited Liab (A Flor	ida Limited Li	iy as it now appears on or a control is a co	ur records.)	
The Articles of Organization for this Limited Liability	ty Company	were filed on May	17,2005	and assigned
Florida document number <u>L 050000 4903</u>	<u>) </u>	•		
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	<u>limited liabi</u>	lity company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limite	ed Liability Company," th	e designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	:	338 Lake 1	Harris	D _C ,
(Principal office address MUST BE A STREET AL	ODRESS)	Lakeland, FL	338/3	<u> </u>
Enter new mailing address, if applicable:				HILL JUN 20 AHASSEE
Enter new mannig address, if applicable; (Mailing address MAY BE A POST OFFICE BOX	n			
Training unitess HATT BEAT 1091 OF FICE BOA	L			25 57 57 57 57 57 57 57 57 57 57 57 57 57
B. If amending the registered agent and/or re registered agent and/or the new registered office a			cords, <u>ente</u>	the name of the ne
Name of New Registered Agent:	David J	B. Rhinehart		
New Registered Office Address:	338 Lal	Ke Harris Dr. Enter Flo	rida street a	 ddress
1	akeland		, Florida	0 may 0
	s- sr-c tod II	City	, 1 101 IUA _	Zip Code
Now Designatured Agent's Signature if shanging Design	anad Amanta			

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
m 6 R	Sarah D. Galarza	3616 Harden Blvd #208 Lakeland, FC 33803	Add Remove
MGR	Stephen S. Galarza	366 Harden Blvd #208 Lakeland, FC 33803	Add Remove
MGR	David B. Rhinehard	3616 Harden Blvd #208 Lakeland, FL 33803	Add Remove
MER	Amy J. Rhinehart	3616 Harden Blvd #208 Lakeland, FL 33803	Add Remove
			Add Remove
			AddRemove
D. If amend	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	IN 20 AM ES SA
Dated	David B. R	er or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00