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| (Requestor's Name) | 1 |
| (Address) | 1/1 |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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G. MCLEOD

MAR - 6 2008

EXAMINER

Ansbacher & McKeel, p.a.

ATTORNEYS AT LAW

BARRY B. ANSBACHER
bba@ansbacher.net
Board Certified Real Estate Attorney

J. THOMAS MCKEEL jtm@ansbacher.net

8818 GOODBYS EXECUTIVE DRIVE JACKSONVILLE, FLORIDA 32217-4692

(904) 737-4600 • FAX (904) 737-4700 Amelia Island (904) 277-2060 WEBSITE: www.ansbacher.net EMAIL: info@ansbacher.net

March 4, 2008

Division of Corporation UPS Tracking #: 1ZFF23890191996492 Registration Section

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Articles of Amendment to Articles of Organization

Dog Investments, LLC Our File # 442/050151

Dear Sir/Madam:

Enclosed please find our check for the amount of \$25.00 for filing Articles of Amendment to Articles of Organization for Dog Investments, LLC. We are changing the name from Dog Investments, LLC to QMI Realty, LLC.

Please stamp the duplicate copies of the above-described instrument and return to us in the enclosed self addressed envelope.

Sincerely yours,

Dianne W. Cosby

\dwc Enclosures

COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: Dog Investments, LLC |
| (Name of Limited Liability Company) |
| |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| |
| Barry B. Ansbacher |
| (Name of Person) |
| Ansbacher & McKeel, P.A. |
| (Firm/Company) |
| 8818 Goodbys Executive Drive |
| (Address) |
| Jacksonville, Florida 32217 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| |
| Barry B. Ansbacher at (904) 7374600 (Area Code & Daytime Telephone Number) |
| (name of randing) |
| Enclosed is a check for the following amount: |
| |
| Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy |
| (additional copy is enclosed) |
| |
| MAILING ADDRESS: STREET/COURIER ADDRESS: |
| Registration Section Registration Section Division of Corporations Division of Corporations |
| P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle |
| Tallahassee, FL 32314 Zoot Executive Center Circle Tallahassee, FL 32301 |

SECRETARY OF STATE DIVISION OF CORPORATION:

08 MAR -5 PM 1: 39

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Dog Investments, LLC (Name of the Limited Lia | bility Company as it now appears on | our records.) | |
|--|---|---|--|
| (A Flo | rida Limited Liability Company) | | |
| The Articles of Organization for this Limited Liabil | ity Company were filed on June 10 |), 2005 and assigned | |
| Florida document number <u>L05000057832</u> | · | | |
| This amendment is submitted to amend the following | ng: | | |
| A. If amending name, enter the new name of the | limited liability company here: | | |
| QMI Realty, LLC | | 1 1 / 01/00 4 11 1/ | |
| The new name must be distinguishable and end with the "L.L.C." | e words "Limited Liability Company," (| he designation "LLC" or the abbreviation | |
| | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office | | ecords, enter the name of the new | |
| | | | |
| | | | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | (Enter Florida street address) | | |
| | , Florida | | |
| - | (City) | (Zip Code) | |
| New Registered Agent's Signature, if changing Regi | stered Agent: | | |
| | | | |
| I hereby accept the appointment as registered as the provisions of all statutes relative to the prop accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha | er and complete performance of m ed agent as provided for in Chapte stered office address, I hereby con | y duties, and I am familiar with and or 608, F.S. Or, if this document is | |
| | (If Changing Registered Agent, Si | gnature 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 = M MGRM = | anager Managing Member | | •. |
|-------------------|--|---|---|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| D. If amei | nding any other information, enter chang | e(s) here: (Attach additional sheets, if necessar | y.) |
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| Dated | | · | |
| | Signature of a member | r or authorized representative of a member | |
| | William B. Holt, Man | · | |
| | Typed | or printed name of signee | _ |

Page 2 of 2

Filing Fee: \$25.00