## W50000 65806

(Requestor's Name)			
(Address)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
_			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dusiness Entity Ivalle)			
(Document Number)			
Certified Copies Certificates of Status			
·			
Special Instructions to Filing Officer:			
·			





700134947557

08/29/08--01004--008 \*\*30.00



M. THOMAS

SEP - 2 2008

**EXAMINER** 

## **COVER LETTER**

Division of Co	rporations			
SURJECT: DeBen	edetto Appraisal Sei	rvices, LLC	ħ	
		ited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspondent	ondence concerning this matter	to the following:		
	Thomas G. DeBenedetto	(Name of Person)		
		<b>,</b>		
DeBenedetto Appraisal Services, LLC				
		(Firm/Company)	08	
	15254 Cortona Way		DB AUG 29 PH 12: 21  THE ANG SEE FLORE  THE ANG SEE	
		(Address)	29 层	
	Naples, Florida 34120			
		(City/State and Zip Code)	£ 25 %	
- 4 - 4 - 4			<b>E</b> A -	
For further information of	concerning this matter, please c	eall:	•	
Thomas G. DeBenede	etto	at ( 239 ) 298-6737		
(Name	of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for t	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 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

TO:

Registration Section

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

Requesting Name Change from DeBenedetts Appraisal Services LLC to Boldster Appraisal Services LLC

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DeBenedetto Appraisal Services, LLC			
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.)		
(A Florida Limited Li	admity Company)		
The Articles of Organization for this Limited Liability Company	were filed on Aug 2005	and assigned	
Florida document number 405000 (4580.6	•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:	0	
Goldstar Appraisal Services, LLC		202 P	
The new name must be distinguishable and end with the words "Limit	ed Liability Company," the designation "LI	C" or the abbreviation	
"L.L.C."		至 29	
Enter new principal offices address, if applicable:		10 m	
(Principal office address MUST BE A STREET ADDRESS)		THE RE	
Principal office guaress MUST BE A STREET ADDRESS		G S	
	,	7	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	<del></del>	·····	
B. If amending the registered agent and/or registered off	ice address on our records, enter th	e name of the new	
registered agent and/or the new registered office address here			
Name of New Registered Agent:			
Maile of New Registered Agent.			
New Registered Office Address:			
	(Enter Florida street 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)

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title Address** Type of Action <u>Name</u> ☐ Remove ☐ Add Remove Add 🗖 Remove Remove **∏** Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated\_ Signature of a member or authorized representative of a member Thomas G. DeBenedetto Typed or printed name of signee

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00