L06000024361

| (Requestor's Name) | | | |
|---|--------------------|-------------|--|
| (Address) | | | |
| (A | ddress) | | |
| (C | ity/State/Zip/Phon | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only

B. KOHR

SEP - 8 2011

EXAMINER



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SECRETARY OF STATE OF CORPORATIONS

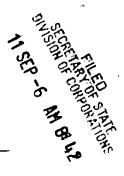
COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| SUBJECT: Title Real Estate 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: |
| Please return all correspondence concerning this matter to the following: Mary Tackson Name of Person |
| Marina Yacht Realty LLC |
| 1707 SE 12 CT |
| Ft. Lauder Olale, FL 33316 City/State and Zip Code Mary my realty @ gmail. Com E-mail/address: (ty be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Mary Tackson at (954 707 - 0772) Name of Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$ Certificate of Status \$55.00 Filing Fee & Certificate of Status \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) |

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



The Articles of Organization for this Limited Liability Company were filed on 3/30/2011 and assigned Florida document number 20600024361

This amendment is submitted to amend the following:

| A. If amending name, enter the new name of the limited liab Marina Yacht Realt | YLLC | | | |
|--|---|--|--|--|
| The new name must be distinguishable and end with the words "Limi "L.L.C." | ted Liability Company," the designation "LLC" or the abbreviation | | | |
| Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | 1707 SE 12 CT Ft. Laud erdole, FL 33316 | | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1707 SE 12 CT Ft. Lauderdde, FL 33316 | | | |
| B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: | | | | |

Name of New Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

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

| MGR = Manager MGRM = Managing Member | | | | |
|--------------------------------------|--|--|----------------|--|
| <u>Title</u> | Name | Address | Type of Action | |
| | | | Add Remove | |
| | | | Add Remove | |
| | | | Add Remove | |
| | · | | Add Remove | |
| | | | Add Remove | |
| | | | Add Remove | |
| D. If amer | nding any other information, enter chang | ge(s) here: (Attach additional sheets, if necessary.) |) —— | |
| _ | | | <u> </u> | |
| - | 0, 200 20 | . // | <u> </u> | |
| Dated | Jug 29, 20 France | 2 | | |
| | Mary Jacks | r or authorized representative of a member O M or printed name of signee | | |

Page 2 of 2

Filing Fee: \$25.00