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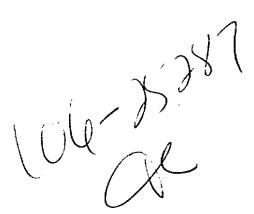
(Requestor's Name)
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(City/State/Zip/Phone #)
(613).63110.2.,
PICK-UP WAIT MAIL
THORSE THORSE
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT: ACCE	ess Realty Florida	, LLC		
	(Name o	f Limited Liability Co	mpany)	
Dear Sir or Madam:				
The enclosed Article	s of Correction and fee(s) a	re submitted for filing.		
Please return all corre	espondence concerning this	matter to the following	g:	
Barry Pokorr	nev			
	(Name of Person)		_	
Access Realty	Florida, LLC		_	
	(Firm/Company)		_	
1122 11th Ter				
	(Address)			ر با در ا استان ا
Paim Beach G	ardens, FL 33418			
	(City/State and Zip Code)		_	1,,1
For further information	on concerning this matter, p	olease call;		
Barry Pokorney		at (_561	789-1970	
(Na	ume of Person)	(Area Code &	È Daytime Telephone Number)	
STREET/COURIED Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	ions er Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check	for the following amount:			
□ \$25 Filing Fee	S30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☑ \$60 Filing Fee, Certificate of Status & Certified Copy	

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST Access	: The name of the limited liability company is: Realty Florida, LLC
SECO]	ND: The articles of organization or the application to transact business
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
	Currently registered as a member-managed LLC. Should be a manager-managed LLC
	with Barry Pokorney listed as the manager-member. This change is necessary to
	alllow Barry Pokorney to become the qualifying real estate broker.
	OR 2
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
Dated:	9 March , 2006
	15/10
	Signature of a member or authorized representative of a member
	Barry Pokorney
	Typed or printed name of signee
	Filing Fee: \$25.00

Certified Copy:

\$30.00 (optional)

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY
ARTICLES OF ORGANIZATION FOR FL ARTICLE I - Name: The name of the Limited Liability Company is: Access Realty Florida, LLC (Must end with the words "Limited Liability Company, "Limited Liability Company," "Limited Li	d Company" or their abbreviation "LLC," or "L.C.,") 28
Access Realty Florida, LLC (Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1122 11th Terrace Paim Beach Gardens, FL 33418	1122 11th Terrace Paim Beach Gardens, FL 33418
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the re	sgistered agent are:
Barry J. Pokorney, Sr. Name	
1122 11th Terrace	TO Be NOT seed by
	ress (P.O. Box <u>NOT</u> acceptable)
Palm Beach Gardens City, State, a	
•	ccept service of process for the above stated limited

liability company at the place designated in this certificate, 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 relating 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..

(CONTENUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Steve Harrison 9 North King Street Leesburg, VA 20176 Kathy Samson 9 North King Street Leesburg, VA 20176
	9 North King Street
	Leesburg, VA 20176
MGRM	Kathy Samson
	9 North King Street
	Leesburg, VA 20176
	P :
MGRM	Barry J. Pokomey, Sr.
	1122 11th Terrace
'	Paim Beach Gardens, FL 33418
Oles and demand if and a second	
(Use attachment if necessary)	
•	ne date of filing: (ODTION)
LE V: Effective date, if other than th	
LE V: Effective date, if other than the fective date is listed, the date must	ne date of filing:, (OPTIONA be specific and cannot be more than five business day
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LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business day
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business day

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)