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J. BRYAN
DEC 23 2010
EXAMINER

COVER LETTER

Division of C			•	
SUBJECT:	Brookfie	ld Streams LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.		•
Please return all corres	pondence concerning this matte	r to the following:		
		Ronald La Duke		10 DEC 22 PH 1:39 10 DEC 22 PH 1:39 PALLAHASSEE, FLORID
		a Duke & La Duke PA	\	22 Pl
		Firm/Company		E. FLC
	3032 E	Commercial Blvd PW Address	/B 200	DAILE DE
	Ft	Lauderdale, FL 3330	8	
		City/State and Zip Code dukesr@yahoo.com		
	E-mail address: (to be used for future annual rep	ort notification)	
For further information	concerning this matter, please of	call:		
	onald La Duke of Person	at (954) Area Code &	821-3727 Daytime Telephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	nclosed) Certified	of Status &
	LING ADDRESS:	STREET/C	COURIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

6 6 6 X

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brookfield Streams LLC

(Name of the Limited Liability Company as it now appears on our records,) (A Florida Limited Liability Company)							
The Articles of Organization for this Limited Lia	bility Company were filed on _	September 12, 2006	_ and assigned				
Florida document numberL060000893	370						
This amendment is submitted to amend the follow. A. If amending name, enter the new name of		iere:	10 DEC 22				
Brookfield & Associates Realty, LLC							
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Com	pany," the designation "LL	" or the abbreviation				
			OR THE				
Enter new principal offices address, if applical	ble:						
(Principal office address MUST BE A STREET	'ADDRESS)						
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>						
		······································					
B. If amending the registered agent and/or registered agent and/or the new registered officers.	registered office address on ce address here:	our records, enter the	name of the new				
Name of New Registered Agent:	Ronald La Duke						
New Registered Office Address:	1909 SW 1st Avenue						
	Enter Florida street address						
	Ft Lauderdale	, Florida	33315				
	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 kereby donfirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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 = Ma MGRM = N	nager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
	<u>.,</u>		Add Remove

	· · · · · · · · · · · · · · · · · · ·		Add
D. If amen	ding any other information, enter chan	nge(s) here: (Attach additional sheets, if necessa	10 DEC 22 PM 1: 39 SEPRETARY OF STATE SALFAHASSEE, FHORID
Dated	, <u> </u>	The Day	
		per or authorized representative of a member	
		Ronald La Duke ed or printed name of signee	

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Filing Fee: \$25.00