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SECRETARY OF STAT

FILED

T. HAMPTON

OCT 27 2008

EXAMINER

COVER LETTER

TO: Registration Division of C		· 31		
SUBJECT: FLOR	IDA'S REALTY GROU	JP, LLC.	_	
-	(Name of Limi	ited Liability Company)		
The enclosed Articles	of Amendment and fee(s) are sub-	mitted for filing.		
Please return all corres	spondence concerning this matter	to the following:		
	ENRIQUE TAWACHI			
		(Name of Person)		
		(Firm/Company)		
	8045 NW 36 ST - SUITE	506A (Address)		
	DODA! - EL ODIDA 22466			
	DORAL, FLORIDA 33166	(City/State and Zip Code)		
For further information	n concerning this matter, please co	all:		
ENRIQUE TAWACHI (Name of Person)		at (786) 472-9501 (Area Code & Daytime T	Clark and Musekov	
(Nan	ne of Person)	(Area Code & Daytime 1	erephone Number)	
Enclosed is a check fo	or the following amount:			
☑ \$25.00 Filing Fee	S30.00 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: 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**

FLORIDA'S REALTY GROUP, 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 L	were filed on 12/08/2006	and assigned	
Florida document number L06000117237	·		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
FLORIDA'S ASSOCIATED GROUP, LLC.			
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ted Liability Company," the design	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		8045 NW 36 STREET	
(Principal office address MUST BE A STREET ADDRESS)		SUITE 506A	
		DORAL, FLORIDA 33166	
Enter new mailing address, if applicable:		8045 NW 36 STREET	
(Mailing address MAY BE A POST OFFICE BOX)		SUITE 506A	
	-	DORAL, FLORIDA 33166	
B. If amending the registered agent and/ registered agent and/or the new registered o Name of New Registered Agent:			s, enter the name of the new
New Registered Office Address:	N/A		
		(Enter Florida	street address)
		. F l	lorida
		(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)

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 = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> **Address Type of Action** MGRM MONICA TAWACHI 8045 NW 36 STREET **₽** Add Remove SUITE 506A DORAL, FLORIDA 33166 MGRM NORMA TAWACHI 8045 NW 36 STREET ₽7 Add SUITE 506A ■ Remove DORAL, FLORIDA 33166 r¶ Add Remove Remove Remove

N/A

SECRETARY OF STATE

AASSEE. FLORIDA

Dated 10-20-2008

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Remove

Typed or printed name of signee

Signature of a member or authorized representative of a member

Page 2 of 2

ENRIQUE TAWACHI

Filing Fee: \$25.00