

LO7000029/52

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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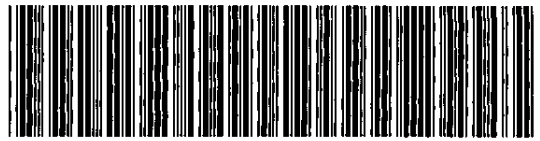
(Business Entity Name)

(Document Number)

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Amenda NC LLC

LO7-29/52

FILED
09 JAN 12 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. CAUSSEAU

JAN 13 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gordon Group, 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:

Leighton Gordon

(Name of Person)

Gordon Group, LLC

(Firm/Company)

4021 NW 91st Terrace

(Address)

Sunrise, FL 33351

(City/State and Zip Code)

For further information concerning this matter, please call:

Leighton Gordon

(Name of Person)

at (954) 237-3981

(Area Code & 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 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**

Gordon Group, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on March 19, 2007

Florida document number L07000029152

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Tax and Homes, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

Same as before (see below)

(Principal office address MUST BE A STREET ADDRESS)

4021 NW 91st Terrace Sunrise, FL 33351

Enter new mailing address, if applicable:

P.O. Box 26152

(Mailing address MAY BE A POST OFFICE BOX)

Tamarac, FL 33320

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:

Same as Before

New Registered Office Address:

Same as Before

(Enter Florida street address)

Same as Before

Florida

Same as Before

(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

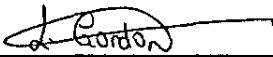
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Lindon Gordon	4021 NW 91st Terrace Sunrise, FL 33351	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Davian Clarke	274 Madison Avenue Irvington, NJ 07111	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

None

FILED
 09 JAN 12 PM 2:55
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated January 10, 2009



 Signature of a member or authorized representative of a member

 Leighton Gordon

 Typed or printed name of signee