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EXAMINER



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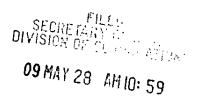
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SECRETARY OF STATE DIVISION OF CONTROL OF ANTION

COVER LETTER

TO: Registration Division of	on Section Corporations			
SUBJECT: V.G.	DIAZ & ASSOCIATES	SLLC		
		ited Liability Company)	· · · · · · · · · · · · · · · · · · ·	
The enclosed Article	es of Amendment and fee(s) are sub	omitted for filing.		
Please return all corr	respondence concerning this matter	to the following:		
	Vladimir G. Diaz			
		(Name of Person)		
	V.G. DIAZ & ASSOCIAT			
		(Firm/Company)		
100 S. PINE ISLAND RD. SUITE 114				
		(Address)		
	PLANTATION, FLORIDA	33324		
		(City/State and Zip Code)		
For further informati	on concerning this matter, please c	all:		
Vladimir G. Diaz		at (954) 472-2520		
(Name of Person)		(Area Code & Daytime Te	elephone Number)	
Enclosed is a check to	or the following amount:			
\$25.00 Filing Fee	e □\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (auditional copy is enclosed)	O\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Re Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L07000032347</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and end with the words "Limite" L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	100 S. PINE ISLAND RD.	
(Principal office address MUST BE A STREET ADDRESS)	SUITE 114	
	PLANTATION, FLORIDA 33324, U.S.A.	
Enter new mailing address, if applicable:	100 S. PINE ISLAND RD.	
	SUITE 114	
(Mailing address MAY BE A POST OFFICE BOX)		

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

Plantation

100 S. Pine Island Road. Suite 114

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

(Enter Florida street address)

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>	Name	Address	Type of Action
MGR	SOUTH FLORIDA REO INC.	100 S. Pine Island Rd. Suite 114 Plantation, Florida 33324, U.S.A.	Add Remove
MGR	Vladimir G. Diaz	100 S. Pine Island Rd. Suite 114 Plantation, Florida 33324, USA	_ _ Add _ _ Remove
MGR	Sara L. Diaz	100 S. Pine Island Rd. Suite 114 Plantation, Florida 33324, USA	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter cha	nge(s) here: (Attach additional sheets, if necessary.)	
			
Dated May 1st	. 2009		
	Signature of a memb Vladimir G. Diaz	per or authorized representative of a member	
_		ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00