## L07000043379

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SECRETARY OF STATE
FALL AMASSEE, FLORIDA

C. LEWIS

MAR 1 9 2009

EXAMINER

## COVER LETTER

TO: Registration Sect Division of Corpo				
SUBJECT: L.A. GAS	SSKA REALTY LLC (Name of Limi	ted Liability Company)		
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
	LUIS ALFONSO GASCA			
		(Name of Person)		
L.A.GASSKA REALTY LLC				
		(Firm/Company)		
	6570 BENHAM CT			
		(Address)		
ORLANDO FLORIDA 32818				
		(City/State and Zip Code)	<del></del>	
For further information coa	ncerning this matter, please co	all:		
LUIS ALFONSO GASCA at ( 407 ) 297 9437		<u> </u>		
(Name of	Person)	(Area Code & Daytime To	elephone 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

2009 HAR 18 AH 11: 22

SECRETARY OF STATE TALEAHASSEE. FLORIDA

L:A.GASSKA REALTY 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 Liability	Company were filed on 04/23/2007	and assigned	
Florida document number L07000043379			
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	imited liability company here:	·	
L.A.GASSKA REALTY & MANAGEMENT GROUP L	LC		
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Company," the	designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	DRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac	gistered office address on our reco ddress here:	ords, <u>enter the name of the nev</u>	
Name of New Registered Agent:			
New Registered Office Address:	(F.4 Fl.		
	(Enter Florida street address)		
	(City)	, Florida	
	(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 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 **Address Type of Action Title** <u>Name</u> 🗖 Add ☐ Remove ☐ Add Remove Remove ☐ Add Remove \_\_\_ Add Remove □ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARS/2 Signature of a member of suthbrized representative of a member Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00