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(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:					
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Re	questor's Name)			
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: GULF FLOREDA REALTY AND ASSOCIATES, ALC (Name of Limited Liability Company)
(Name of Elimica Elability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
FELEX. AMABELE
(Name of Person)
GULF FLOREDA REKLTY AND ASSOCIATES. LC
15200 S. TAMFAME TRAFL, SULTE 105
(Address)
FF. MYERS, FZ 33908 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
FELEX AMABELE at (239) 337-3863 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person)  at (239) 337-5863  (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee & Solution Status Solution S
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

## GULF FLOREDA REALTY AND ASSOCIATE, LIC

(Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on and assigned document number 57 437 and assigned			
SECOND:	This amendment is submitted to amend the following:  MANACER / MEMBER DETAFL:			
	INCLUDE:			
	TITLE- BRKR (BRKR) (DIRECTOR)			
	WARROCK, GARY			
	15200 S. TIMENME TRAFL, SUETE 105			
	FT. MYERS, FL 33908	<u> </u>		
	*			
Dated O	CT. 24, , 2007.	四	2007 OCT 25	
	Signature of a member or authorized representative of a member	E.E.B	5 PM 12: 5	m
	FELEX AMASTLE IN	<u>S</u> H	<u> </u>	
	Typed or printed name of signee			

Filing Fee: \$25.00