L07000091752

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T. HAMPTON DEC 2 2 2008 EXAMINER **COVER LETTER**

L07000091157

TO: Registration S Division of Co			
SUBJECT: Florida	Realty Partners FM	1 LLC	
		lited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Scott A. Dascani		
		(Name of Person)	
	Keiler Williams World Cl	ass Realty	
		(Firm/Company)	
	9400 Gladiolus Dr. Suit 1	100	
		(Address)	
	Ft. Myers/Florida 33908		
		(City/State and Zip Code)	
For further information of	concerning this matter, please o	all:	
Scott A. Dascani		at (239) 877-6961	
(Name	of Person)	(Arca Code & Daytime 1	Celephone Number)
Enclosed is a check for t	he following amount:		
2 \$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

MAILING ADDRESS: Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

(additional copy is enclosed)

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 REALTY PA		
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on our Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability	Company were filed on 09/07/07	and assigned
Florida document number L07000091757	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the wo 'L.L.C."	ords "Limited Liability Company," the	designation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:	<u> </u>	
(Principal office address MUST BE A STREET ADD	RESS)	<u> </u>
`		DE COMME
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		PH RPO
		72: SAT
		F 70
B. If amending the registered agent and/or registered agent and/or the new registered office ado		rds, enter the name of the new
registered agent and/or the new registered office and	uress nere.	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	/Futan Flor	ida street address)
	(Enter Flor	iuu sireei uuuressj
		, Florida(Zip Code)
	(City)	(Zip Coae)

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 **Type of Action Address** Title <u>Name</u> BEVERLY DAVIO 4080 CAPE COLIE BLVD ANTA, GUEDA EL 13955 ☐ Add ☑ Remove MGR 🗖 Add Remove ☐ Remove ☐ Add Remove ∫ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Stott A. DASCANI
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00