## L07000127764

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**EXAMINER** 



A Professional Partnership Attorneys at Law

## Kyler Kohler & Ostermiller, LLP

September 21, 2009

856 South Sage Dr., Suite 300 Cedar City, Utah 84720 p. 435.586.9366 f. 435.586.9491

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Mathew N. Sorensen, P.C. <sup>‡</sup>
Brandon L. Baker <sup>‡</sup>

<sup>1</sup> Admittot in California & Utah <sup>2</sup> Admittod in Utah <sup>3</sup> Also Leensed CPA in Arizona, Ocegon & Utah Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

To Whom It May Concern:

Enclosed for processing are duplicates of the Articles of Amendment for National Real Estate Investments, LLC (L07000127764). Also enclosed is a check in the amount of \$25.00 to cover the filing fee.

If you find the enclosed document acceptable, please note your acknowledgment of receipt on the copy and return it to my office with the enclosed return envelope as noted above.

Thank you for your anticipated attention to this matter.

Very truly yours,

KYLER KOHLER OSTERMILLER & SORENSEN, LLP

Holly Butterfield Legal Assistant

Enclosure

## **COVER LETTER**

TO:	Registration S Division of Co				
SUBJECT: National Real		National Real	Estate Services, LLC		
		Name of Limi	ted Liability Company		
The end	closed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
Holly Butterfield					
			Name of Person		700
Kyler Kohle		Kyler Kohle	er Ostermiller & Sorensen,	LLP	SE SE
			Firm/Company		第 P
		050.0	and Cara Duine Cuite 200		SEP 23 AM II: 22 SEP 23 AM II: 22 SECRETARY OF STATI
856 South Sage Drive, Suite 300				TO HE	
					LOST P.
		C	edar City, Utah 84720	···	記る
			City/State and Zip Code		
		E-mail address: (	olly@kkolawyers.com to be used for future annual report notif	ication)	
For fur	ther information	concerning this matter, please of	eall:		
Holly Butterfield			at (_435 )	586-9366	
	Name	of Person	Area Code & Daytim	e Telephone Number	
Enclose	ed 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	l) Certified (	of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section ion of Corporations Box 6327	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

National Real Estate Services, LLC

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

(A Florida Limited Liability Company)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia	ibility Company were filed on	December 28, 2007 <sub>2</sub>	and assigned
Florida document numberL07000127	764		<i>"</i> "
This amendment is submitted to amend the follow	wing:		
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the "L.L.C."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name registered agent and/or the new registered office address here:  Name of New Registered Agent:			
	the words "Limited Liability Comp	pany," the designation "LLC"	or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	TADDRESS)		
• • • • • • • • • • • • • • • • • • • •			
		our records, enter the n	ame of the new
Name of New Registered Agent:			
New Registered Office Address:		-	
	Enter Florida street address		
		, Florida	
	City	Zi	ip 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

Title Address **Type of Action** Name MGRM Marcela Angulo 3956 Town Center Blvd, Suite 215 . □ Add Orlando, FL 32837 Remove MGRM John Moore 3956 Town Center Blvd, Suite 215 ☐ Add ✓ Remove Orlando, FL 32837 MGR Marcela Angulo 3956 Town Center Blvd, Suite 215 Orlando, FL 32837 ☐ Remove Remove \_\_\_Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Article V: The Company shall be changed from Member Managed to Manager Managed. Signature of a snember for authorized representative of a member Marcela Angulo, Manager Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00