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10/16/12 - 01006--001 **25.00

Office Use Only

B. KOHR
OCT 17 2012
EXAMINER



COVER LETTER

TO: Registration Section Division of Corpo			· ·
SUBJECT:	L SON R	EALTY LLC	<u>'</u>
•	Name of Limit	ed Liability Company	Some and the second sec
			Fig. S. "Feigura"
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	Contract of the contract of th
÷	Anne	Diodato Name of Person	THE STATE
	V91 5	ON RealTY LLC	Y
	23 E	Lwood Road	
	Cente	reach. NY 117	<u> 20</u>
•	Pio da E-mail address: (to	City/State and Zip Code +O. Anne O. 9 Ma be used for future annual report had iffication	il.com
For further information con-	cerning this matter, please ca	111: 631-922-4	417
Anne Di	odato	at (<u>b31) 1736-4</u> Area Code & Daytime Tele	415
,		,	•
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

VAL SON REAL	TY LLC.
(Name of the Limited Liability Compan (A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company vi Florida document number <u>LOS 0000 13974</u> .	were filed on 2/7/08 and assigned.
This amendment is submitted to amend the following:	A CONTRACTOR OF THE CONTRACTOR
	7
A. If amending name, enter the new name of the limited liabil	ity company here:
same - No change	
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:	Same-No Change
(Principal office address MUST BE A STREET ADDRESS)	
•	
Enter new mailing address, if applicable:	Same- No Change
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address here	
Name of New Registered Agent: Pasc	yal Valencia
New Registered Office Address: (Same) 1450	Enter Florida street address
Drland	Florida 32837-7156 City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree	e to act in this capacity. I further agree to comply with

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 <u>Address</u> **Type of Action** <u>Title</u> Name ☐ Remove ☐ Add Remove ☐ Add □ Remove □ Add ☐ Remove □ Add ☐ Remove □ Adá ☐ 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 Anne Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00