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SECRETARY OF STATE
NALLAHASSEE, FLORIDA

JOSEPH A. TROIANO, ESQ., PA

A PROFESSIONAL ASSOCIATION

JOSEPH A. TROIANO, ESQ. CPA. LLM* 239.823. 5222 Cell JAT621@COMCAST.NET

DENNIS J. BESSEY, ESQ. MST, ASSOCIATE ** 941.628.6947 CELL TROIANOLAW2@COMCAST.NET 12800 UNIVERSITY DRIVE, SUITE 380 FORT MYERS, FLORIDA 33907 239.482.3998 TELEPHONE 239.466.2866 FAX

February 20, 2008

PRIVATE AND CONFIDENTIAL

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

RE: YORK REALTY, LLC

Dear Sir or Madam:

Enclosed for filing please find Articles of Amendment for York Realty, LLC whereby the Joseph A. Troiano is removed as Manager and Shawn Sommer is added as Managing

Also enclosed is our check in the amount of \$30.00 for the required filing fee and certification of Status.

Please return the Certificate of Status to this office in the postage paid return envelope that we have provided.

Thank you for your assistance. Should you have any questions or require additional information, please feel free to contact me.

Joseph A. Troiano, Esq.

For the Firm

JAT/bsb Enclosures

. , ,

cc: Mr. Shawn Sommer

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MASTERS OF TAXATION

*Licensed to Practice in Florida and Maine

**Licensed to Practice in Florida, District of Columbia and Michigan

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YORK REALTY, LLC (Name of the Limited Liab) (A Flori	ility Company as it now appears on our record da Limited Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liabilit Florida document number <u>L08000016847</u>	ry Company were filed on 02/15/2008	and assigned
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the designation	ation "LLC" or the abbreviation
B. If amending the registered agent and/or re registered agent and/or the new registered office a		enter the name of the new
Name of New Registered Agent:		B 25 P
New Registered Office Address:	(Enter Florida sti	
_	, Flor (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 Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action** <u>Title</u> <u>Name</u> Address 12800 UNIVERSITY DRIVE MGR JOSEPH A. TROIANO Add SUITE 380 FORT MYERS, FL 33907 Remove MGRM SHAWN SOMMER 1930 PARK MEADOWS SUITE #6 FORT MYERS, FL 33907 **✓** Add ☐ Remove Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated FEBRUARY 2008 Signature of a member or authorized representative of a member

Typed or printed name of signee

JOSEPH A. TROIANO, ESQ.

Page 2 of 2

Filing Fee: \$25.00