L08000025709

(Re	equestor's Name)			
(Ad	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
	·			

Office Use Only



000120515790

03/19/08--01018--020 **30.00

UB APR 23 PM 3: 17

SECRETARY OF STATE OF STATE OF STATE OF CORPORALION

T. HAMPTON

APR 2 4 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Real Pix UC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sackeline D. Ramirez
(Firm/Company) 312 Buttonwood Dr. (Address) Kissimmel Ft. 34743 (City/State and Zip Code)
For further information concerning this matter, please call:
Sackeline D. Ramirez at HOD 433-267/ (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\begin{align*} \pm

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



RECEIVED
08 APR 23 PM 2: 11

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 20, 2008

JACKELINE D RAMIREZ 312 BUTTONWOOD DR KISSIMMEE, FL 34743

SUBJECT: REALTY PIX LLC Ref. Number: L08000025709

We have received your document for REALTY PIX LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The attached form must be completed in order to file the document.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 608A00016853

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number 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 "Li"L.L.C."	SECRETARY OF STATE OIVISION OF CORPORATIONS and assigned and abbreviation C" or the abbreviation		
B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here:	e name of the new		
Name of New Registered Agent:			
New Registered Office Address:			
(Enter Florida street addi	(Enter Florida street address)		
, Florida,	(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, 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>Title</u>	<u>Name</u>	Address	Type of Action	
			Add	
			Remove	
			Add	
		· · · · · · · · · · · · · · · · · · ·	Remove	
			Add Remove	
			— ()	
			Add Remove	
			Add Remove	
			_	
			Add Remove	
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	_	
			1 80	
_	 			
_			CORPU	
			FILED STAIL ARY OF STAIL STORPORATIONS 3 PH 3: 17	
Dated	1122 03) NS	
·				
	Signature of a membe	er or authorized representative of a member		
	Typed	or printed name of signee	 ''	

Page 2 of 2

Filing Fee: \$25.00