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SECRÉJARY OF STATE [ALL'AHASSEE; FLORIDA

J. SAULSBERRY EXAMINER MAR 25 2011

## **COVER LETTER**

Registration Section

TO:

Division of Cor	porations		
SUBJECT:C	LARUS REALT	Y ADVISORS LO	
	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	bmitted for filing.	
Please return all correspo	ondence concerning this matter	r to the following:	
	ERA	Name of Person	
		Name of Person	
	<u>G</u> ë	M Management LL Firm/Company	- C
		Firm/Company	
	/	SJ 51 amberly Drus	ie
		Address	
		Tampa, FL 83	3647
	<del></del>	City/State and Zip Code	
	EMUN	ZEN @ GEMREALES	TATE, BIZ
	•	to be used for future annual report notificat	· ·
For further information co	oncerning this matter, please c	call:	SEC OIL
Em	est MUNZEN	at(_ <i>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </i>	2011 MAR 24 AM 3: 2 SECRETARY OF STAT elephone Number  4494  elephone Number
Name of	f Person	Area Code & Daytime T	elephone Number
Enclosed is a check for th	e following amount:		TATE ORIG
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	at ( \$/3) - 7777- Area Code & Daytime T  \$555.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Registr Divisio P.O. Bo	ING ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLARUS REAL	TY ADVIS	ORS, LLC	<u></u> -	
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears of ability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company v Florida document number <u>しゃくりのり 5つりろり</u> .	vere filed on(	10/08	and assig	gned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabili	ity company here:			
The new name must be distinguishable and end with the words "Limite "L.L.C."		_		
Enter new principal offices address, if applicable:	15251	AMBERLY	Drive	
(Principal office address MUST BE A STREET ADDRESS)	15251 TAM	IPA, FL	27647	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1525 To	1 amberly	Dure 33647	
B. If amending the registered agent and/or registered office address here:  Name of New Registered Agent:  New Registered Office Address:		records, <u>enter</u>	HAAH ECRE	Annual property of the second
	Enter	Florida street ada	<i>lfes</i> ≌ ω	1,,,,,
		, Florida	ATE ARIE	
	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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
<del></del>			Add Remove
			Add Remove
			Add Remove
····	<del></del>		Add Remove
			Add Remove
<del></del>			AddRemove
D. If amen	ding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	<i>y.)</i>
			2011 MAR 24 AM 3: SECRETARY OF STA
Dated	2/15/11	·	AM 3: 22  OF STATE OF STATE OF STATE
	Signature of a memb	er or authorized representative of a member	
	ERI	MEST S. MVN2EN  ed or printed name of signee	
	Type	a or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00