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ON THE FLORIDA

K SALY EXAMINER AUG 7 2012

J. DANIEL BREDE Professional Association Attorney at Law

Suite 201, East Building 1900 N. W. Corporate Blvd. Boca Raton, Florida 33431 Telephone (561) 241-8996 Facsimile (561) 241-7859 jdbrede1@ bellsouth.net

August 3, 2012

Department of State Division of Corporations Corporate Filings P. O. Box 6327 Tallahassee, FL 32314

RE: RT SAXEN, JR. LLC

Dear Sir/Madam:

Enclosed please find the original Articles of Amendment to Articles of Organization of RT SAXEN, JR. LLC and Cover Letter. Also enclosed is a check payable to the Secretary of State in the amount of \$25.00. Please return to us a filed copy in the enclosed envelope.

If you have any questions, please call.

g. Daniel Brede

J. DANIEL BREDE

JDB:rc Enclosures

cc: Teresa C. Riechers

COVER LETTER

TO:	Registration S Division of Co					
SUBJE	· ECT:	RT SA	XEN, JR. LLC			
Name of Limited Liability Company						
The en	closed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please	return all corresp	ondence concerning this matter	to the following:			
			J. DANIEL BREDE Name of Person			
J. DANIEL BREDE, P.A.						
	Firm/Company					
		1900 NW CORPORATE BLVD., SUITE 201 EAST				
			Address			
		ВО	CA RATON, FL 33431			
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·		
		E-mail address: (echer98@yahoo.com to be used for future annual report not	ification)		
For fur	ther information	concerning this matter, please c	call:			
DAN BREDE			at (561)	241-8996		
	Name	of Person	Area Code & Dayti	me Telephone Number		
Enclos	ed is a check for	the following amount:				
₽\$2 5	5.00 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/COUR Registration Sect Division of Corp Clifton Building 2661 Executive O Tallahassee, FL 3	orations Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED.

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SLUMI JAKY OF STATE

ALLAHASSEE, FLORIDA

	RT SAXEN, JR. LLC	TALLA	LARY OF ST.			
(Name of the Limited) (A	Liability Company as it now appea Florida Limited Liability Company)	rs on our records.)	ARY OF STATE ASSEE, FLORIDA			
The Articles of Organization for this Limited Lia	ability Company were filed on	07/02/2008	and assigned			
Florida document number L08000064	765					
This amendment is submitted to amend the follo	wing:					
A. If amending name, enter the new name of	the limited liability company he	<u>·e</u> :				
VALENTINE	DUPLEX LLC					
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	nny," the designation "L	LC" or the abbreviation			
Enter new principal offices address, if applica	ble:		·····			
(Principal office address MUST BE A STREET	(ADDRESS)	· · · · · · · · · · · · · · · · · · ·				
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE E	<u></u>					
B. If amending the registered agent and/o registered agent and/or the new registered off		our records, <u>enter t</u>	he name of the new			
Name of New Registered Agent:	TERESA C. RIECHERS					
New Registered Office Address:						
<u>-</u>	Enter Florida street address					
		, Florida				
	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, 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 Name Address Type of Action** ☐ Add Remove ___ Add Remove ☐ Add ☐ Remove ∏Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2012 Signature of a member or authorized representative of a member TERESA C. RIECHERS Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00