

L08000065849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

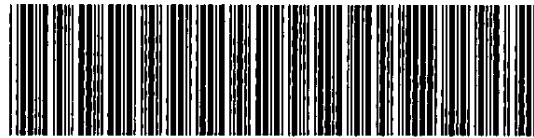
(Document Number)

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10 MAY 11 PM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

MAY 13 2010

EXAMINER

S. HAWKES

APR 28 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 29, 2010

BEST QUICK TAX RETURNS, INC.
320 S BUMBY AVE SUITE 10
ORLANDO, FL 32803

SUBJECT: PROPERTY GROWING LLC
Ref. Number: L08000065849

We have received your document for PROPERTY GROWING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 610A00010685

TRANSMITTAL LETTER

**BEST QUICK TAX RETURNS, INC
320 S. BUMBY AVE. SUITE 10
ORLANDO, FL 32803**

I am enclosing a check of \$ 35 dollars, please send me a stamped copy of the articles.

Thank you

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PROPERTY GROWING, LLC.

(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 July 08, 2008 and assigned Florida document number L080000065849

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 "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

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

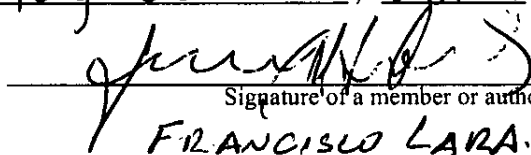
Title	Name	Address	Type of Action
MGRM	Claudia L. Saavedra	1970 E. Osceola Parkway 78 Kissimmee, FL 34743	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA
STATE

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Francisco J. LaFA 49 unites → add
Claudia L. Saavedra 51 unites → add

Dated May 03, 2010



Signature of a member or authorized representative of a member

FRANCISCO LARA

Typed or printed name of signee