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SECRETARY OF STATE

COVER LETTER

TO: Registration of Division of	on Section Corporations	•			
SUBJECT:	REO S	Sunshine, LLC			
	Name of Lim	ited Liability Company			
	es of Amendment and fee(s) are sul				
ricase return an con	respondence concerning and matter	to the following.			
		Gino Mora			
		Name of Person			
REO Sunshine, LLC					
		Firm/Company			
	49	N Federal Hwy # 210			
		Address			
	Por	mpano Beach, FL 33062			
	in	City/State and Zip Code			
	E-mail address: (to be used for future annual report noti	fication)		
For further informat	ion concerning this matter, please of	call:			
	Gino Mora	at (954)	275-8570		
Na	ame of Person	Area Code & Daytin	ne Telephone Number		
Enclosed is a check	for the following amount:				
\$25.00 Filing Fe	e \$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)		
	AILING ADDRESS: egistration Section	STREET/COUR Registration Section			

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
09 OCT 13 AMII: 03

REC) Sunsi	hine, LLC	TALLACTA	ARY DE OF
(Name of the Limited Liabilit (A Florida	ty Compar Limited L	ny as it now appear lability Company)	s on our records.	SSEE, FLORIDA
The Articles of Organization for this Limited Liability	07/10/2008	and assigned		
Florida document numberL08000066955	<u>_</u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and end with the wo	ords "Limi	ted Liability Compa	ny," the designation "I	LC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2365 NW 73rd	d Ave	
		Sunrise, FL 33313		
Enter new mailing address, if applicable:		49 N Federal	Hwy # 210	
(Mailing address MAY BE A POST OFFICE BOX)		Pompano Beach, FL 33062		
B. If amending the registered agent and/or registered agent and/or the new registered office ade			ur records, <u>enter t</u>	he name of the new
				·
New Registered Office Address: 236	2365 NW 73rd Ave Enter Florida street address			
		Sunrise	, Florida	33313
		City	, FIONUA	Zip Code
New Pegistered Agent's Signature if changing Pegister	od Agonts			

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 **Type of Action** <u>Title</u> **Name** Address MGR Jose Marti 5256 NE 1st Ave ∏Add Fort Lauderdale, FL 33334 Remove □ Add Remove □ Add ☐ Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

_		SECR
 Dated	October 7 , 2009 .	CREJARY LAHASSE
	Signature of a member or authorized representative of a r	E, FL

Gino Mora
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00