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EXAM, NEED

COVER LETTER

Division of Corp	porations	!			
SUBJECT: Appraise	er Group of Florid	a LLC		8	
	(Name of L	imited Liability Company)			_
	į	4 1 1			
The enclosed Articles of A	Amendment and fee(s) are s	submitted for filing.			
Please return all correspon	ndence concerning this matt	er to the following:			
	•	! :			
	George Vecchio				
		(Name of Person)		•	
	Appraiser Group of Flo	rida LLC			
	i	(Firm/Company)	-		
	1607 South 8TH Street	l			
	<u> </u>	(Address)			
	\$.	1			
	Fort Pierce, FL 34950,			302	
		(City/State and Zip Code)	***		-a2799)
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For further information co	ncerning this matter, please	e call:	Ţ	ANN SEP 16	Ç.Jan
	٠.		Ç	44 B	·
George Vecchio	e n	at (772) 778-8000			, 1940
(Name of	Person)	(Area Code & Daytime T	elephone Number)	Y OF STATE	. H
				器 8	
Enclosed is a check for the	e following amount:			·ţa-	
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fe Certificate of S Certified Copy (additional cop	Status &)

MAILING ADDRESS:

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on 08/07/2008 and assigned Florida document number <u>L0</u>8000075916 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 BUX) 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: George Vecchio Name of New Registered Agent: 1607 South 8TH Street New Registered Office Address: (Enter Florida street address) Fort Pierce, Florida 34950 (City)

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)

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** <u>Address</u> **Type of Action** <u>Name</u> MGRM Welford, James A ■ Add 1106 22nd Court Remove Vero Beach Florida 32960 □ Add ☐ Remove 🗂 Add Remove □ Add Remove r Aad Remove 9 Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 15 Signature of a member or authorized representative of a member George Vecchio Typed or printed name of signee

. If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00