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EXAMINER

COVER LETTER

| Division of Corporations |
|---|
| SUBJECT: Real Property & Investment Advisors LLC (Name of Limited Liability Company) |
| The enclosed Articles of Amendment and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Hui Li (Name of Person) |
| Real Property & Investment Advisors LCC |
| 8456 North Jako Pkny |
| Orlando FL 32827 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Raymond W Lee at 407 590 4078 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee \$30.00 Filing Fee & \$25.00 Filing Fee & \$60.00 Filing Fee, |
| Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) |

MAILING ADDRESS:

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

Real Property & Investment Advisors LLC

(Name of the Limited Liability Company as it now appears on our records.)

| | (City) | (Zip Code) |
|---|-------------------------------------|------------------------------------|
| | , Florida | |
| New Registered Office Address: | (Enter Florida street address) | |
| New Registered Office Address: | | |
| Name of New Registered Agent: | | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address h | | s, enter the name of the new |
| (Mailing address MAY BE A POST OFFICE BOX) | C)RLAINDO F | <u>L 328 [2 - [3]</u> |
| Enter new mailing address, if applicable: | P.O. Box | 72/3/6 H 32872-/3/ |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new principal offices address, if applicable: | | |
| The new name must be distinguishable and end with the words "L.L.C." | imited Liability Company," the desi | ignation "LLC" or the abbreviation |
| A. If amending name, enter the new name of the limited li | | D 4 TATE |
| A If amounting warms and the name and the limited li | ishility same any house | E |
| This amendment is submitted to amend the following: | | ASSE ASSE |
| Florida document number | 4 | CRES CRES |
| The Articles of Organization for this Limited Liability Compa Florida document number <u>LO800085/44</u> | any were filed on | and signed |
| | a/0/n | Q |

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 <u>Title</u> <u>Address</u> Type of Action <u>Name</u> Raymond Wai Lee Add
 Remove _ Add Remove □ Add Remove ☐ Add Remove ∫ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necess A) Dated Sptember Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00