

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407) 841-1200
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

PREMIER REALTY OF CENTRAL FLORIDA, LLC

Certificate of Status	0
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Corporate Filing Menu

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G. MCLEOD

OCT 29 2008

EXAMINER

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08 OCT 28 PM 4:06SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 OCT 28 AM 11:09

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

PREMIER REALTY OF CENTRAL FLORIDA, 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 09/15/2008 and assigned
Florida document number L08000088886

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)

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DIVISION OF CORPORATION
08 OCT 28 AM 1:09

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)

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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	Robert S. Foutz	109 Oak View Place Sanford, FL 32773	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Richard E. Foutz	109 Oak View Place Sanford, FL 32773	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGMCI	Robert S. Foutz	109 Oak View Place Sanford, FL 32773	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Article IV, Management, is amended to provide that the Company is to be
a manager-managed company.

Dated October 28th, 2008

Signature of a member or authorized representative of a member

Robert S. Foutz

Typed or printed name of signer

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