L0800008997

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
, , , ,	
PICK-UP WAIT MAIL	
(Business Entity Name)	··· .
(Business Entity Name)	
·	ψ,
(Document Number)	
Contillation of Chaire	i
Certified Copies Certificates of Status	٠
	,
Special Instructions to Filing Officer:	



400156817334

06/10/09--01043--002 **25.00

A. LUNT

JUN 11 2009

EXAMINER

Office Use Only

COVER LETTER

TO:	Registration Secti Division of Corpo					
SUBJI	ECT:	Home Pla	ce Realty, LLC			
		Name of Limite	d Liability Company			
The en	closed Articles of Ar	nendment and fee(s) are subn	nitted for filing.			
Please	return all correspond	ence concerning this matter t	o the following:			
			Cristy Campbell			
			Name of Person			
		Hor	Home Place Realty, LLC		700	- water
			Firm/Company	· · · · · · · · · · · · · · · · · · ·		· Williams
2500 N		2500 Maitla	nd Center Parkway, Ste 3	311B	TALLAHIASSEE FLORI	11
			Address		PA PA) J
			Maitland, FL 32751		3: 12 Significant of the control of	**************************************
			City/State and Zip Code	 -	72	
		caca	mpbell@tpcflorida.com			
		E-mail address: (to	be used for future annual report noting	iication)		
For fu	rther information con	cerning this matter, please ca	JI:			
	Crist	y Campbell	at (_407_)	284-4325		
	Name of F	Person	Area Code & Daytin	ne Telephone Numbe	r	
Enclo	sed is a check for the	following amount:				
₹ \$2	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	d) Certifie	ate of Status &	ed)

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

	e Place Realty, LLC lity Company as it now appea	rs on our records.)	
(A Florid	la Limited Liability Company)	13 on our records:	
The Articles of Organization for this Limited Liability	Company were filed on	09/22/2008	and assigned
Florida document number L08000089976			
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company he	re:	2209 -
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	any," the designation "E	
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·	P P
(Principal office address MUST BE A STREET AD	DRESS)		0.00 P
Enter new mailing address, if applicable:			·
(Mailing address MAY BE A POST OFFICE BOX)	·		
B. If amending the registered agent and/or registered agent and/or the new registered office a		our records, enter t	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	E	nter Florida street addi	ress
	<i>C</i> :-	, Florida	7: C - 1:
	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 Type of Action <u>Address</u> **Title** <u>Name</u> MGR Robert Orsolits 2500 Maitland Center Parkway ☐ Add Remove Suite 311B Maitland, FL 32751. Dennis Kotaska MGR 2500 Maitland Center Parkway Remove Suite 311B Maitland, FL 32751 ☐ Add _ Remove Add Remove □ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member of authorized representative of a member

Typed or printed name of signee

Page 2 of 2

Jeffrey J Vratanina

Filing Fee: \$25.00