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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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Office Use Only

COVER LETTER

TO: Registration S Division of Co		. ,	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Wendy Fasulo	
		Name of Person	
	Elite Prope	rty Management Services, I	LLC
	,	Firm/Company	
	9:	27 Cypress Cove Way	
		Address	
	Ta	rpon Springs, FL 34688	
		City/State and Zip Code	
	Wfa	sulo@tampabay.rr.com to be used for future annual report notifi	auton
P - 6 - 4 - 1 - 6 1			Caron)
	concerning this matter, please of	Zaii:	
w	endy Fasulo		224-1871
Name	of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for t	the following amount:		
\$25.00 Filing Fee	\$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)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 28, 2010

WENDY FASULO 927 CYPRESS COVE WAY TARPON SPRINGS, FL 34688

SUBJECT: ELITE PROPERTY MANAGEMENT SERVICES, LLC

Ref. Number: L08000108498

We have received your document for ELITE PROPERTY MANAGEMENT SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 310A00018217

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

10 AUG -4 PM 12: 23

Elite Property Management Services, LEC RETARY OF STATE (Name of the Limited Liability Company as it now appears on old recate ASSEE, FLORIDA (A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia	ability Company were filed on	11/21/2008 an	d assigned
Florida document numberL08000108	498		
This amendment is submitted to amend the following	wing:		
A. If amending name, enter the new name of	the limited liability company he	re:	
	*		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	any," the designation "LLC" or	the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	(ADDRESS)		
Forton many mailing address if anythering			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B			
Manning address MAT BE A FOST OFFICE B			
:			
B. If amending the registered agent and/or registered agent and/or the new registered off		our records, enter the name	me of the new
registered agent and/or the new registered off	ice aduress nere:		
Name of New Registered Agent:			
· _			
New Registered Office Address:	E	nter Florida street address	
		, Florida	4.
	City		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 **Title Name Address** Type of Action **MGMR** Wendy Fasulo 927 Cypress Cove Way ☑ Add Tarpon Springs, FL 34688 Remove MGR Rosemary Yiengst 1519 Riverdale Drive ✓ Add Oldsmar, FL 34677 Remove **MGR David Greenaway** ✓ Add 927 Cypress Cove Way Tarpon Springs, FL 34688 Remove Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Signature of a member or authorized representative of a member

2010

August 1

Wendy Fasulo

Typed or printed name of signee

- Page 2 of 2

Filing Fee: \$25.00