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S. HAWKES

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EXAMINER

## **COVER LETTER**

` TO:

то:'	Registration Sec Division of Corp				
SUBJI	ECT: 1S	T KNIGHT REALT	TY REFERRAL GRO	OUP LLC	
		Name of Limi	ited Liability Company		
The en	closed Articles of A	mendment and fee(s) are sub	omitted for filing.		
Please	return all correspon-	dence concerning this matter	to the following:		
			ANDY LINIHAN		_
			Name of Person		-
		1ST KNIGHT	REALTY REFERRAL (	GROUP LLC	
			Firm/Company		_
		7:	320 STATE ROAD 52		
•			Address	111111111111111111111111111111111111111	_
			HUDSON, FL 34667		
			City/State and Zip Code		-
		F-mail address: ()	eal.estate@verizon.net to be used for future annual repor	1 notification)	
For fur	ther information cor	icerning this matter, please c	-	· nounvalion,	
	. AND	NZ 1 1830 1 8 8 1		200 200	
· . ····	AND Name of I	Y LINIHAN Person	at ( 727 )	863-0032 Daytime Telephone Number	
				ayame relepione rumbe	•
Enclose	ed is a check for the	following amount:			
<b>₹</b> ]\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is end	closed) Certifie	ate of Status &
	Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 ee, FL 32314	Registration S Division of C Clifton Build	Corporations	

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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) 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida \_

Zip Code

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

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<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR_	ALICE ESTEY	7320 STATE RD. 52	Add
		HUDSON, FL 34667	Remove
			頭留工
	<del> </del>		Add C Remove
			- 199 7
			Add 5 Remove P 12. 03
			Remove W
-			_
			Add Remove
			Kemove
			Add Remove
			<del></del>
			Add
			Remove
D. If amend	ling any other information, enter	r change(s) here: (Attach additional sheets, if necessary.)	
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<del></del>			_
•			_
Dated	SEPTEMBER 1	2009	
	-2-1		
		member or authorized representative of a member	<del></del>
	Ansy	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00