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(Requestor's Name)		
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PICK-UP	WAIT	MAIL
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EXAMINER

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99 APR 29 PH 3: 56
SECRETARY OF STATE
TALLAHASSEE FLORID

Carlos Nunez 6400 SW 62nd Avenue Miami, Florida 33134 (305)774-9000

April 28th, 2009

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Dear Gentlemen,

Attached is an amendment to a corporation along with its filing fee.

Thank you,

Carlos Nunez

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: REO ASSET MANAGEMENT & PRESERVATION, LLC	
(Name of Limited Liability Company) Changename R)
The enclosed Articles of Amendment and fee(s) are submitted for filing. 12EO ASSET SPECIALITY	rs, LL
Please return all correspondence concerning this matter to the following:	
CARLOS NUNZZ (Name of Person)	
(Name of Person)	
PEO ASSET SPECIALISTS LLC (Firm/Company)	
6400 SW 62nd NUTNUE (Address)	
City/State and Zip Code)	
For further information concerning this matter, please call:	
CAMOS NUTZE at (301) Z1G-3510 (Name of Person) (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy Certified Copy	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nome of the Limited Liability	MAGEMENT PRESONATION LLC lity Company as it now appears on our records.) da Limited Liability Company)
(A Florid	la Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on <u>February 27, 2009</u> and assigned
This amendment is submitted to amend the following:	:
A. If amending name, enter the new name of the li	imited liability company here:
"L.L.C."	レレこ words "Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	DRESS) MIMI FL 33143
(Principal office address MUST BE A STREET ADI	DRESS) MIMI FL
	3314 ['] 3
Enter new mailing address, if applicable:	6400 SW 62nd AvenuE
(Mailing address MAY BE A POST OFFICE BOX)	6400 SW GZnd AVENUE MIAMI FL
	33143
B. If amending the registered agent and/or registered agent and/or the new registered office ad	gistered office address on our records, enter the name of the new
Name of New Registered Agent:	CMOS NUNEZ 6400 SW G2Nd NENUE FOR A (Enter Florida street address) R T
New Registered Office Address:	6400 SW G2nd NENUE FEB &
New Registered Office Paddess.	(Enter Florida street address) 20 1
	(City) Florida (City) Florida
	(City) Trip Code)
the provisions of all statutes relative to the proper accept the obligations of my position as registered	nt and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with and agent as provided for in Chapter 608, F.S. Or, if this document is
being filed to merely reflect a change in the register	ered office address, I hereby confirm that the limited liability

(If Changing Registered Agent, Signature of New Registered Agent)

company has been notified in writing of this change.

'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> **Address** Type of Action Name 1 _ Add Remove MG/M CAILOS NUMEZ Add Remove 🗖 Add Remove **□** Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Ignature of a member or authorized representative of a member Ramos. Typed or printed name of signee

Páge 2 of 2

Filing Fee: \$25.00