## L09000000792

(Requestor's Name)				
(Address)				
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(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
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S. HAWKES

APR - 9 2009

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corpor			
SUBJE	ECT:	<del></del>	REALTY, LLC ted Liability Company)	
The en	closed Articles of Am	endment and fee(s) are sub	mitted for filing.	
Please	return all corresponde	nce concerning this matter	to the following:	
	-	RICHI	MD K DUTT (Name of Person)	ER
	-		EALTY LLC (Firm/Company)	
	-	2500 N	E COACHMAN (Address)	RD
	-	CLEARWA.	TER FLORFO (City/State and Zip Code)	33765
For fur	ther information conc	erning this matter, please ca	ıll:	
R	ICHARD K	DUTTER	at ( <u>727)</u> 4/	0 - 4800
	(Name of 1	isoti)	(Area Code & Dayt	me Telephone Number)
Enclose	ed is a check for the fo	ollowing amount:		
<b>X</b> \$25	.00 Filing Fee C	1\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclose	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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DUTTE		LLC	
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears of Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability (	Company were filed on MAR	CH 2, 2009 and assigned	
Florida document number <u>L090000 20 79 2</u>	<u></u> .	TO THE STATE OF TH	
This amendment is submitted to amend the following:		0	
A. If amending name, enter the new name of the lim	nited liability company here:	17.3	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company,"	the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
	<b>10:</b> 1	, 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)

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> <u>Name</u> **Address Type of Action** CHARLES R BRENNY MGR 12532 TWEN BRANCH ACRES RS Add
TAMPA, FLOREDA 33626-4425 TREMOVE ☐ Add Remove ř 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

RFCHARD K DUTTER

Typed or printed name of signee

Page 2 of 2

Dated \_\_\_\_

Filing Fee: \$25.00