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M. THOMAS

MAY 1 1 2009

EXAMINER

COVER LETTER

	gistration Section vision of Corporations		
SUBJECT	REO Home A	And Pool Service LLC	
		ited Liability Company	
The enclos	ed Articles of Amendment and fee(s) are su	bmitted for filing.	
Please retu	n all correspondence concerning this matte	er to the following:	
		Warren Desjardins	
		Name of Person	
<u>t</u>	REO	Home And Pool Service IIc	
		Firm/Company	7
	<u> </u>	4329 Skyline Blvd.	TALLAHASSEE, FLORID
		Address	10 PM 10 PM
•		Cape Coral,Fl. 33914	SER E
<i>;</i>	Wa.	City/State and Zip Code	102 123
	E-mail address:	(to be used for future annual report notifica	tion)
For further	information concerning this matter, please	call:	
	Warren Desjardins	at (239) 5	41 8528
	Name of Person	Area Code & Daytime T	
Enclosed is	a check for the following amount:		
\$25.00	Filing Fee \$\(\sum_{\text{\$30.00 Filing Fee & Certificate of Status}} \)	\$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:	STREET/COURIE	R ADDRESS:

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REO Home And	Pool Service	llc	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	03/13/2009	and assigned
Florida document number L09000024643			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company he	re:	
SWF Home S			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Comp	any," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:	509 96th Av.	N Naples, FL 3	
(Principal office address MUST BE A STREET ADDRESS)			至 五
			P3 1 F
			SEE OF T
Enter new mailing address, if applicable:	<u></u>		TOP TO
(Mailing address MAY BE A POST OFFICE BOX)			PATE 23
			, , , , , , , , , , , , , , , , , , ,
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ei	nter Florida street ac	ddress
	-	, 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:

	<u>Name</u>	<u>Address</u>	Type of Ac
	**************************************		Add Remove
_			Add Remove
<u> </u>			Add Remove
			Add
			Add Remove
		<u>. </u>	Add Remove
		change(s) here: (Attach additional sheet	
	WARREM DES DARDIN	05 15 A 5070 0WN	er if possible,
	May 5th	2009	2009 MAY -8 SEGRETARY TALLAHASSE

Page 2 of 2

Filing Fee: \$25.00