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T. CLINE

APR 14 2009

EXAMINER

COVER LETTER

Division of Co.	rporations				
SUBJECT: Grego	ory Swanson Real E	state Services "L.L.C.,"			+
-		ited Liability Company)			_
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Gregory Swanson	(Name of Person)			
		(Name of Posses)			
		(Firm/Company)			
	3582 Eversholt Street		4 .	~2	
		(Address)	A CE	CFC B	77
	Clermont, FL 34711		AHA	2009 APR 13	-
		(City/State and Zip Code)	355	[²² ω	F
For further information of	concerning this matter, please c	all:	ָרָי. דְּרָסָיִּ	AMII: 03	O
Gregory Swanson		at (352) 223-6413		Seri Co	•
(Name	of Person)	(Area Code & Daytime T	'elephone Number)		
Enclosed is a check for the	he 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 F Certificate of Certified Cop	Status &	

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

(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

GREGORY SWANSON REAL ESTATE SERVICES "L.L.C.,"

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabs	ility Company	were filed on March 16, 2009	and assigned
Florida document number L09000025130			·
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of th	e limited liabi	lity company here:	
GREGORY BRUCE SWANSON "L.L.C.,"		* _	
The new name must be distinguishable and end with the "L.L.C."			ignation "LLC" or the abbreviation
Enter new principal offices address, if applicab		3582 Eversholt Street	
(Principal office address MUST BE A STREET A	<u>4DDRESS)</u>	Clermont, FL	T
		34711	SSE 3
Enter new mailing address, if applicable:		- same -	AMII: 03
(Mailing address MAY BE A POST OFFICE BOX)			NOS NOS
B. If amending the registered agent and/or registered agent and/or the new registered offic			s, enter the name of the nev
Name of New Registered Agent:	- no change -		
New Registered Office Address:		(Enter Florida	a street address)
	, F	Tlorida	
		(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 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 = N	lanaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
		TA L'L ANA	SE Demove REIT
			ARY Add STATE OS
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.	₽ 3
Dated April	10, 2009		
	Gregory B. Swanson	r or authorized representative of a member	
	Typed	or printed name of signee Page 2 of 2	

Filing Fee: \$25.00