

L09000029535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

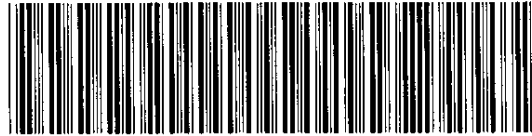
L09- 29535

(Document Number)

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09 JUN - 8 AM 10:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. Sutton JUN - 9 2009

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REAL ESTATE SERVICES AND PROPERTIES, LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ELISEA PESANTES.
Name of Person

REAL ESTATE SERVICES AND PROPERTIES, LLC
Firm/Company

5061 SO. STATE RD 7 UNIT-604
Address

DAVIE, FLORIDA 33314
City/State and Zip Code

FABELI@BELLSOUTH.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELISEA PESANTES
Name of Person

at (954 309-1702)
Area Code & Daytime Telephone Number

Enclosed is a check for the 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 Fee,
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 20, 2009

ELISEA PESANTES
5061 SO. STATE ROAD 7, UNIT-604
DAVIE, FL 33314

SUBJECT: REAL ESTATE SERVICES & PROPERTIES, LLC.
Ref. Number: L09000029535

We have received your document for REAL ESTATE SERVICES & PROPERTIES, LLC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 409A00017136

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

09 JUN -8 AM 10: 20

SECRETARY OF STATE
TALLAHASSEE FLORIDA

REAL ESTATE SERVICES AND PROPERTIES, LLC

(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 Liability Company were filed on 03/25/2009 and assigned
Florida document number 409000029535.

This amendment is submitted to amend the following:

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

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	ELISEA PESANTES	5061 So. STATE RD UNIT 604 DAVIE - FL 33314	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
HGR	DIANE PESANTES	1711 N.W. 88 WAY PENBROKE PINES, FL 33024	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

09 JUN - 8 AM 10:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

Dated

MAY 29, 2009

Signature of a member or authorized representative of a member

ELISEA PESANTES

Typed or printed name of signer