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SECRETARY OF STATE
TALLAHASSEE, FLORIC

D. BRUCE

JUL 07 2009

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: J.	etta Newman	A setion and Realog Contied Liability Company	num. IIC
SUBJECT:	Name of Lim	ited Liability Company	, 10 0
The enclosed Articles of	of Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	pondence concerning this matter	r to the following:	
	Soeth	Newman	
		Name of Person	
	•••	Firm/Company	<u>-</u>
	4740 Pen	cock Dr	
		. Address	
	Pensacola	Fl 32504	09 . SEC
		City/State and Zip Code	JUL -
	E-mail address: ((to be used for future annual report notification)	SSER NRY
For further information	concerning this matter, please	call:	IL-6 PM 2:31 ETARY OF STATE HASSEE, FLORID
	4.1	_	D 2:3 STAT
Name	Newman of Person	at (F50) 201-1034 Area Code & Daytime Telephon	ne Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 shassee, FL 32314	STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Joeth Newman	Auction	end	Realy	Lomp.	any L	لد
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 Liabi	lity Company v	vere filed on _	April 8	17,200	<u>ና</u> and as	ssigned
Florida document number <u>L 0 90000 40</u>	772 01	800	015267	7528		
This amendment is submitted to amend the following	ng:					
A. If amending name, enter the new name of th	e limited liabil	ity company	<u>here</u> :			
The new name must be distinguishable and end with the "L.L.C."	ne words "Limite	d Liability Co	mpany," the d	lesignation "	LLC" or the	abbreviation
Enter new principal offices address, if applicable	e:	Joeth	News	nan		
(Principal office address MUST BE A STREET A	(DDRESS)	Joetha 4740 Pensacol	Peaca	k Dr	09 ALE	
•		Pensacol	L, FI	3250	¥6 E	A to Millions
Enter new mailing address, if applicable:		_		(-6 PH	
(Mailing address MAY BE A POST OFFICE BO	<u>X)</u>			ŗ	-0	5
					A S	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address here:	ce address o	n our recoi	rds, <u>enter</u>	the name	of the nev
Name of New Registered Agent:	Joesta	Newman				
New Registered Office Address:						
	Enter Florida street address					
-		City	,	Florida	Zin Coo	
New Registered Agent's Signature, if changing Regi	stered Agent:				2.00	

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 Clanging 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** Peacock Dr MOR Add 🎦 Remove ☐ Add Remove Remove ∏Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee