## L09000040877

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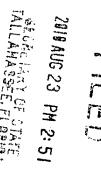
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**EXAMINER** 



000184529610

08/23/10--01005--015 \*\*25.00



## **COVER LETTER**

TO:

TO:	Registration Section Division of Corpor								
SUBJE	ECT:	Eastshore I	Realty G	roup, LLC					
	•	Name of Limi	ted Liability	Company					
The en	closed Articles of Am	endment and fee(s) are sub	omitted for fil	ing.					
Please	return all corresponde	nce concerning this matter	to the follow	ring:					
	_		•	D. Ostlie					
			Name	of Person					
	Eastshore Realty Group, LLC								
			Firm/C	ompany					
	7575 Dr. Phillips Blvd								
	_		Ado	lress	-			20	
	Orlando, Florida						2018 AUG	ence)	
	City/State and Zip Code					<b>美国</b>	JG 2		
	_		jeffostlie@	cfl.rr.com			633	23	1
For fur	ther information conc	E-mail address: (		future annual report	notification)		記の	PH 2:5	ţ
	Jeffre	ey Ostlie	ot (	407 )	330-4	884	12 m	5	
	Name of Per	<del></del>	at (	Area Code & Da					
Enclos	ed is a check for the fo	ollowing amount:							
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certi	Filing Fee & fied Copy tional copy is encl	<u></u>	Certified	te of Statu		ed)
•	Registratio Division of P.O. Box 6	f Corporations		STREET/CO Registration So Division of Co Clifton Buildin 2661 Executiv Tallahassee, F	ection orporations ng e Center Cir				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability C (A Florida Lim	ompany as it now appear nited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Con Florida document number	npany were filed on	4/28/09	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company her	<u>e</u> :		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compa	ny," the designation "	LLC" or the abbrevia	_ tio
Enter new principal offices address, if applicable:				_
(Principal office address MUST BE A STREET ADDRE	SS)			_
	,		70 2	
Enter new mailing address, if applicable:			RAUG	1
(Mailing address MAY BE A POST OFFICE BOX)			<b>第二 公 F</b>	,==
	<del>, , , , , , , , , , , , , , , , , , , </del>		TO P T	7
		.,	S N C	Ţ
B. If amending the registered agent and/or register registered agent and/or the new registered office address		our records, <u>enter</u>	the name of the	<u>1ev</u>
Name of New Registered Agent:				_
New Registered Office Address:				_
	En	ter Florida street ad	dress	
		, 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 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
MGRM	Jennifer M. Dollar	3899 W. Lake Mary Blyd Suite Lake Mary, FL 32746	Add Remove
			Add Remove
	<u> </u>		Add Remove
	<u> </u>		Add Remove
· · · · · · · · · · · · · · · · · · ·			And And Remove
			Add Remove
D. If an	nending any other information, e	enter change(s) here: (Attach additional sheets, if no	
			· · · · · · · · · · · · · · · · · · ·
Dated _	8/17/	, <u>Zelo</u> .	<u>,</u>
	1 / / - '	of a member or authorized representative of a member  D. OSTLIE  Typed or printed name of signee	
	/	· · · · · · · · · · · · · · · · · · ·	

Page 2 of 2

Filing Fee: \$25.00