## L09000047389

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## **COVER LETTER**

Division of Co				
Realty Sal	les & Solutions, LLC			
SUBJECT.	Name of Lin	nited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Craig W Rudolph			
		Name of Person		
	Realty Sales & Solutions,	LLC		
	<del> </del>	Firm/Company	· <del></del>	
	127 Spanish Bay Dr			
	·	Address		
	Sanford, FL 32771			古事
		City/State and Zip Code		
	Craig@CraigRudolph.com			二
		to be used for future annual report notif	fication)	<b>=</b> 190
For further information	concerning this matter, please c	all:		
Craig Rudolph		407 461-5181 at ( )		7:22
Name	of Person	Area Code Daytime	e 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 Fed Certificate of St Certified Copy (additional copy is a	tatus &

**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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Realty Sales & Solutions, 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 May 15, 2009 and assigned Florida document number \_\_\_\_\_L09000047389 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Realty Solutions 4 You, LLC The new name must be distinguishable and contain 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

## 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 605, 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 Authorized Person(s) a	uthorized to manage,	enter the title, n	ame, and address	of each person	being added
or removed from our records:	•				

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March 14	,		17				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00