10900048142

(Requ	iestor's Name)	_		
		•		
(Addr	ess)			
(Addr	ess)			
(City/l	State/Zip/Phone	a #î		
(City/	State/Zip/Filon	= #)		
_				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
		·		
(Document Number)				
Certified Copies	Certificates	s of Status		

Special Instructions to Filing Officer:

L. SELLERS

JUN 2 5. 2010

EXAMINER

Office Use Only



700182452937

06/24/10--01009--020 **25.00



COVER LETTER

TO: Registration Sec Division of Corp						
SUBJECT: Denvere REO Group, LLC Name of Limited Liability Company						
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.				
Please return all correspon	dence concerning this matter	to the following:				
	Joseph Haymore Name of Person					
	Un	ited Capital Fund, LLC Firm/Company				
	4	532 W. Kennedy Blvd Sta	£320			
		•				
. 1		Tampa, FL 33609 City/State and Zip Code				
	jhaymore@unitedcapitalreo.com					
	E-mail address: (to be used for future annual report notification)					
For further information con	ncerning this matter, please c	all:				
Dea	nna Aliano	at (772) 6	26-3815			
Deanna Aliano at (772) 626-3815 Name of Person Area Code & Day time Telephone Number						
Enclosed is a check for the	following amount:					
[] \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	[]\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Denve	ere RE	CO 6	roup,	LC			
(<u>Name of the Limited I</u> (A	lability Compa Florida Limited L	nv as it now iability Com	appears on ou pany)	ir records.)			
The Articles of Organization for this Limited Lia Florida document number LOG DOOCH		were filed o	on 5/10	9/09	and as	ssigned	
This amendment is submitted to amend the follow	wing:						
A. It amending name, enter the new name of	the limited liab	ility compa	ny here:	*			
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability	Company," the	e designation "Ll	.C" or the	abbrevi	ation
Enter new principal offices address, if applica	ble:	4532 W	. Kennedy I	Blvd			
(Principal office address MUST BE A STREET ADDRESS)		5mt	le 320	<u> </u>			
		Tampa,	FL 33609			X	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Same			RETARY OF S	UN 24 PM	TI TI
B. If amending the registered agent and/o registered agent and/or the new registered off			s on our rei	cords, <u>enter th</u>		හා of the	new
Name of New Registered Agent:	Wright, Pon	isolott, & L	.ozeau, Tria	al Attorneys			
New Registered Office Address:	New Registered Office Address: 1002 SE Mo		onterey Commons Blvd. Suite 100 Enter Florida street address				-
		Stuart	2	. Florida	3499	36	
		City	<u> </u>	_,	Zip Coo	łe	
New Registered Agent's Signature, if changing R	egistered Agent:		\rightarrow				
I hereby accept the appointment as registered the provisions of all statutes relative to the pracept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this c	oper and comp tered agent as _l egistered office	ikte perfori provided fo	nance of my o r in Chapter	duties, and I ar 608, F.S. Or, ij	n familia f this doc	ir with c cument	and

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>	Address	Type of Action			
٢	16RM	Joseph Haymore	4830 W Kennedy By	Add Remove			
۲	<u>16RM</u>	Abundant Holdings LLC	4532 W Kennedy Blvd Stute 320 Tampa, 78 33609	p ₹ Add ☐ Remove			
				Add Remove			
				Add Remove			
		:		_□Add _□Remove			
				Add Remove			
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)							
	A. 4:	- ' -					
	Dated						
Signature of a thember or authorized representative of a member Joseph Haymore							
Typed or printed name of signes							
	Page 2 of 2						

Filing Fee: \$25.00