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SECRETARY OF STATE
TAIL AHASSEE, FLORID

M. THOMAS

JUL 10 2009

**EXAMINER** 

## COVER LETTER

TO:	Registration S Division of Co		•	· •			
SUBJI	ECT:	WELFARE I	REAL ESTATE LLO	C			
	<u> </u>		ited Liability Company				
		of Amendment and fee(s) are sulpost	_				
			Sean Burgess				
			Name of Person				
		USA	Corporate Services I	nc.			
19 W.			Firm/Company		47/417		
			V. 34th Street Suite 10	018	IA S	2009 JUL -9 AM IO: OH	
			Address			الل	1
			New York, NY 10001		ASS		FILED
			City/State and Zip Code			4 宝	
		Sea E-mail address: (	in@usa-corporate.cor to be used for future annual rep	n ort notification)	F	STA	
For fur	ther information	concerning this matter, please of	all:		20		
	S	ean Burgess	at ( 212 )	239-5050	ext. 109		
	Name	of Person	Area Code &	Daytime Telepho			
Enclose	ed 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 en	_	\$60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy	atus &	i)
	MAII	LING ADDRESS:	STREET/C	OURIER ADI	DRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WELFAR	<u>RE REAL ESTATE L</u>	.LC	
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appe a Limited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	June 23, 2009	and assigned
Florida document numberL0900061064	·		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the li</u>	mited liability company he	ere:	
The new name must be distinguishable and end with the w'L.L.C."	vords "Limited Liability Comp	pany," the designation "Ll	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	DRESS)	700	G 3 T
Enter new mailing address, if applicable:		THE PUT	
(Mailing address MAY BE A POST OFFICE BOX)			FESTER
B. If amending the registered agent and/or reg		our records, enter th	e name of the new
registered agent and/or the new registered office ad	idress here:		
Name of New Registered Agent:			
New Registered Office Address:		nter Florida street addre	
	E	ess	
		, Florida	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> **Type of Action MGRM** Infiniti Trust (NZ) Limited Level 6, WHK Gosling Chapman Tower 7 Add 51-53 Shortland Street Aukland 1010, New Zealand MGRM Infinity Trust (NZ) Limited Level 6, WHK Gosling Chapman Tower ☐ Add 51-53 Shortland Street Aukland 1010, New Zealand ∏Add ☐ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 8 2009 Dated \_\_\_\_\_

Sean Burgess
Typed or printed name of signee

Signature of a member or authorized representative of a member

Filing Fee: \$25.00