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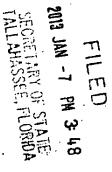
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Registration Section
Division of Corporations

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JEANNETTE TORRES LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeannette Torres

Name of Person

South Florida Hometown Realty LLC

Firm/Company

16120 Opal Creek Dr.

Address

Weston, FL 33331

City/State and Zip Code

itsaboutrealestate@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeannette Torres

,,, 954, **328-243**8

Name of Person

Area Code & Daytime Telephone 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)

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**

FILED #2013 JAN -7 PH 3: 48

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JEANNETTE TORRES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

(11110111111111111111111111111111111111	mines siasing company)		
The Articles of Organization for this Limited Liability Co	ompany were filed on July	y 8, 2009	and assigned
Florida document number L0900065889	_ ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company her	<u>e</u> :	
SOUTH FLORIDA HOMETOWN REALTY LL	.C		
The new name must be distinguishable and end with the word "L.L.C."	is "Limited Liability Compa	ny," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	ESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office addr		ur records, <u>ente</u>	er the name of the new
			
Name of New Registered Agent:			
New Registered Office Address:		er Florida street a	uldress
	City	, Florida	Zip Code
N	•		Zip Coae
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent a	and comes to est by this	musita I Gudhan	gonza to asmalis with
i nervoy avvepi ine appoiniment as registerea agent a	na agree to act in this ca	pacny, i juriner	agree to compty 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>	Address	Type of Action	
			Add	
			Remove	
				
			Add	
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			Remove	
			Remove	
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			Remove	

nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
1/3/2013
& . Jane
Signature of a plember or authorized representative of a member
Jeannette Torres
Typed or printed name of signee

Page 3 of 3
Filing Fce: \$25.00

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