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EXAMINER

JIVISION OF CORPORATIONS

10 AUG -9 AM 8: 46



3309 W Bay to Bay Blvd. Tampa, FL 33629 Phone: 813-321-1500 ~ Fax: 813-321-6500

10 Alle S MA ON TO STATE OF THE STATE OF THE

August 4, 2010

To Whom it May Concern:

Let this document serve as my official notification of immediate resignation of my position as Qualifying Broker for Valencia Realty, LLC.

Julie Hanigan

COVER LETTER

TO:	Registration Se Division of Cor			10 AUG 3 1		
CUDIE	CT.	Valenci	a Realty, LLC	6 30		
SUBJE	CI:		ed Liability Company			
			·	9 1		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	7		
Please	return all correspo	ondence concerning this matter	to the following:			
		Christian O'Ryan				
		Name of Person				
		Pennington, Moore, Wilkinson, Bell & Dunbar P.A.				
		Firm/Company				
		2701 North Rocky Point Drive, Suite 900				
	Address					
		Tampa, FL 33607				
		City/State and Zip Code				
		E-mail address: (1	ian@penningtonlaw.cor o be used for future annual report	notification)		
For fu	rther information	concerning this matter, please c	all:			
Faye Postma		at (_813_)	321-1500			
	Name o	of Person	Area Code & Da	ytime Telephone Number		
Enclos	sed is a check for t	the following amount:				
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl	S60.00 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		Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vale	enc <u>ia</u> Realty, LLC		6 36 C	
(Name of the Limited Library (A Floric	ity Company as it now appears a Limited Liability Company)	s on our records.)	- THE STATE OF THE	
(11.10.10	a Billinea Blacking Company,			
The Articles of Organization for this Limited Liability	Company were filed on	7/10/2009	and assigned	
Florida document number <u>L09000066717</u>	· · · · · · · · · · · · · · · · · · ·			
This amendment is submitted to amend the following	:			
A. If amending name, enter the new name of the li	imited liability company here	2:		
The new name must be distinguishable and end with the vull.L.C."	words "Limited Liability Compa	ny," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AD	DRESS)			
•				
,				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	***************************************			
D 10 11 11	-i-tad accion address an o	uu usaamda antan ti	he name of the new	
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		our records, <u>enter d</u>	ne name of the new	
				
Name of New Registered Agent:		·····		
New Registered Office Address:				
	Enter Florida street address			
	, 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Title Name 1 <u>Address</u> Type of Action MGR Julie Hanigan ☐ Add ☑ Remove 4667 Lake Valencia Blvd, West Palm Harbor, FL 34684 Jonathan Byrd MGR ✓ Add 7824 Riverwood Oaks Dr. Riverview, FL 33569 Remove ☐ Add ☐ Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated_ Signature of a member or authorized representative of a member Kevin Byne Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00