

**L09000073893**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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09 NOV -3 PM 3:30  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

NOV 03 2009



## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Real Estate Fraud Prevention Organization,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:

Scott Hartnett

Name of Person

Real Estate Fraud Prevention Organization,LLC

Firm/Company

3525 n.e 2 avenue

Address

Miami,Florida 33137

City/State and Zip Code

hartnett79@yahoo.com

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

For further information concerning this matter, please call:

Scott Hartnett

Name of Person

at ( 305 )

987-4084

Area Code & Daytime 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 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 14, 2009

REAL ESTATE FRAUD PREVENTION ORGANIZATION,LLC  
ATTN: JOHN A. ROMNEY  
8346 SW 37 ST.  
MIAMI, FL 33155 US

SUBJECT: REAL ESTATE FRAUD PREVENTION ORGANIZATION,LLC  
Ref. Number: L09000073893

It has been brought to the attention of the Department of State, Division of Corporations, that service of process cannot be served on JOHN A. ROMNEY as registered agent for REAL ESTATE FRAUD PREVENTION ORGANIZATION,LLC at 2655 S. BAYSHORE DR., 304, MIAMI, FL 33133. In accordance with Florida Statutes, every business entity shall keep the registered office open from 10:00 a.m. to 12:00 noon each day except Saturdays, Sundays, and legal holidays, and shall keep one or more registered agents on whom process may be served at the office during these hours.

Consider this letter as notification of the Department of State's notice of intent to administratively dissolve/revoke REAL ESTATE FRAUD PREVENTION ORGANIZATION,LLC, for failure to maintain a registered agent as required by section 608.448(1)(c), Florida Statutes. This business entity will be dissolved/revoked on or after November 30, 2009 unless an address change that complies with Florida Statutes, or indication that service can be properly served at 2655 S. BAYSHORE DR., 304, MIAMI, FL 33133 is sent to my attention at the address below.

I am enclosing a "Statement of Change of Registered Office or Registered Agent" form to be completed and returned to my attention with the appropriate filing fee. If you have questions regarding this matter, feel free to contact this office at (850) 245-6900.

Karon Beyer, Chief  
Bureau of Commercial Recording  
Division of Corporations

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Real Estate Fraud Prevention Organization, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

09 NOV - 3 PM 3:30  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

The Articles of Organization for this Limited Liability Company were filed on 7/31/2009 and assigned  
Florida document number L09000073893.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:** 3525 n.e 2 avenue  
**(Principal office address MUST BE A STREET ADDRESS)** Miami, Florida 33137

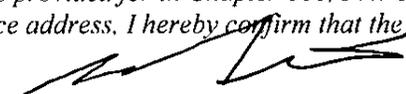
**Enter new mailing address, if applicable:** P.O Box 558232  
**(Mailing address MAY BE A POST OFFICE BOX)** Miami, Florida 33255

**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:** Scott Hartnett  
**New Registered Office Address:** 3525 n.e 2 avenue  
*Enter Florida street address*  
Miami, Florida 33137  
*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, 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>	<u>Type of Action</u>
MGRM	Richard Xiques	3525 n.e. 2 avenue Miami, Florida 33137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Scott Hartnett	3525 n.e 2 avenue Miami, Florida 33137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	William Hartnett III	3525 n.e 2 avenue Miami, Florida 33137	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Please Amend John A.Romney's address to 3525 n.e 2 avenue  
Miami, Florida 33137

Dated October 30, 2009

  
Signature of a member or authorized representative of a member

John A. Romney  
Typed or printed name of signee