L09000002128

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	•
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B u	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	_	_
	A.	LUNT
	AUG	2 5 2010
	EXA	MINER

Office Use Only



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COVER LETTER

	Registration Sec Division of Corp					
SUBJEC	CT:	REP Ma	nagement LLC			
		Name of Limi	ted Liability Company			
		mendment and fee(s) are sub	•			
			Geo Geovanni			
			Name of Person		_	
		REP Management, LLC			_	
Firm/Company						
7512 Dr Phillips Blvd, Suite 50-248)-248	21			
	Address			A AU	į	
Orlando, FL 32819 City/State and Zip Code		2918 AUG 23 PM	_			
			F-11 - 11	_		
		geo E-mail address: (t	.geovanni@gmail.com o be used for future annual report	t notification)	7	
For furth	er information cor	ncerning this matter, please co	•	,	THE CO	
	Geo	Geovanni	at (407)	925-2602		
	Name of I	Person	Area Code & D	aytime Telephone Numbe	er	
Enclosed	is a check for the	following amount:				
\$25.0	0 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc	losed) Certified	ate of Status &	
		IG ADDRESS: ion Section	STREET/CO Registration S	DURIER ADDRESS: Section		

MAILING ADDRESS: 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

	REP Management LLC				
(Name of the Limi	ted Liability Company as it now appea (A Florida Limited Liability Company)	ars on our records.)			
The Articles of Organization for this Limited	d Liability Company were filed on	10/22/2009	and assigned		
Florida document numberL09000	102128	•			
This amendment is submitted to amend the f	following:				
A. If amending name, enter the new nam	e of the limited liability company he	ere:			
The new name must be distinguishable and end "L.L.C."	with the words "Limited Liability Comp	pany," the designation "I	LC" or the abbre	eviatio	
Enter new principal offices address, if app	olicable:		7 2		
(Principal office address MUST BE A STR	EET ADDRESS)				
			AH 206 2	474.75 800E 850	
			23 881	1	
Enter new mailing address, if applicable:		T 2	1.1.		
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>		
		· · · · · · · · · · · · · · · · · · ·			
B. If amending the registered agent ar registered agent and/or the new registered		our records, <u>enter t</u>	he name of th	ie nev	
Name of New Registered Agent:	Geo Geovanni				
New Registered Office Address:	7515 Dr Phillips Blvd, Suite	e 50-152			
	Er	Enter Florida street address			
	Orlando	, Florida	32819		
	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 **Title** <u>Name</u> Address **Type of Action MGRM** Nebel, Richard J One North Orange Ave # 603 ☐ Add Orlando, Fl. 32801 √ Remove LouGrossi II, Louis V MGRM One North Orange Ave # 603 ☐ Add
✓ Remove Orlando, FL 32801 ☐ Add Remove Remove rn Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Please removed FEI/EIN Number from public records on SunBiz 8/19/2010 Dated _____ Signature of a member of authorized representative of a member Geo Geovanni Typed/or printed pame of signee

Filing Fee: \$25.00

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