(Requestor's Name)			
(Address)	500182610525		
(Address) (City/State/Zip/Phone #)			
(Business Entity Name)	08/02/1001008020 **30.00		
(Document Number)			
rtified Copies Certificates of Status			
pecial Instructions to Filing Officer: L. SELLERS			
AUG 4 2010 EXAMINER			

COVER LETTER

):	·	Registration Section
		Division of Corporations

GROUP LLC SUBJECT:

ame 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:

FRAN ERRONE

Firm/Company So WILLOW AVE Address 309

TAMPA, FL 33606 City/State and Zip Code E-mail address: (to be used for future annual report hotification

For further information concerning this matter, please call:

at $(\frac{B/3}{Area Code & Daytime Telephone Number}$

Name of Person

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

ARTICLES OF AMENDMENT TO	
ARTICLES OF ORGANIZATION	
OF	
-	
RGA GROUP LLC	· · · · · · · · · · · · · · · · · · ·
(Name of the Limited Liability Company as it now appears on c (A Florida Limited Liability Company)	our recoras.)
The Articles of Organization for this Limited Liability Company were filed on	3/09 and assigned
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," t "L.L.C.".	the designation "LLC" or the abbreviatio
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
<u></u>	
	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	
	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our registered agent and/or the new registered office address here:	records, <u>enter the name of the new</u>
Name of New Registered Agent:	
New Productored Office Address	

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.

New Registered Agent's Signature, if changing Registered Agent:

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street addre

Florida

7364 173

2

DA



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

City

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

MGR = Manager MGRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
MGR	ROBERT BANDES	1368 SPALDING RD STE C DUNEDIN, FL 34698	Add
			Add Remove
	- <u></u>	t	Add Remove
<u>-</u>	• ••• ••••••••••••••••••••••••••••••••		Add Remove
			Add Remove
 	<u></u>		Add Remove
D. lfamen	FROM! CONSTRUC	er change(s) here: (Attach additional sheets, if ne CTION MANAGEMENT	cessary.)
	TO ! HRCHITE	CTURAL SERVICES	4
Dated	7/28	. <u>2010</u>	
	Signature of E.	a member or authorized representative of a member WILLIAM HENRY Typed or printed name of signee	
		Page 2 of 2	
		Filing Fee: \$25.00	