L09000110452

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SECRETARY OF STATE

J. BRYAN

JAN 20 2012

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	F&FRE	AL ESTATE, LLC	.•	
	Name of Lim	ited Liability Company		_
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		E3
		Golan Feldman		が大き
		Name of Person		TALLANIS EFFLORIO
		Firm/Company		FLORING INC.
	1640	Town Center Circle #210	·-	- DM
		Address		
		Weston, Fl, 33326 City/State and Zip Code		_
	Gol	anfeldman@gmail.com		
	E-mail address: (to be used for future annual report notif	fication)	-
For further information	concerning this matter, please of	call:		
G	olan feldman	at (_954_)	881-1818	
Name	of Person	Area Code & Daytim	ne Telephone Numb	per
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	Certific d) Certific	Filing Fee, cate of Status & ed Copy onal 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

EREREAL ESTATE LIC

(Name of the Limited Lial (A Flor	bility Company as it now appears rida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liabil			and assigned
Florida document number L09000110452	<u>2</u> .		
This amendment is submitted to amend the followin A. If amending name, enter the new name of the		TALLARIA	Con the appreviation
The new name must be distinguishable and end with the "L.L.C."		," the designation "Ll	.Cror the abbreviation
Enter new principal offices address, if applicable			7
(Principal office address MUST BE A STREET A	DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	address here:	r records, enter th	
	Emer		:33
_	City	, Florida	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>Name</u>	Address	Type of Action
FELDMAN, JENNIFER	1640 TOWN CENTER CIR #210 WESTON FL 33326 US	Add Remove
		Add Remove
		Add Remove
<u> </u>		Add Remove
		Add Remove
		Add Remove
ng any other information, enter chan		
	ASSE E. F.	
	·	
-	Golan Feldman	
	regany other information, enter chan	rg any other information, enter change(s) here: (Attach additional sheets, if necessary

Page 2 of 2

Filing Fee: \$25.00