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SECRETARY OF STATE

J. SAULSBERRY EXAMINER

JUL 24 2012

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: VAVRED Property Preservation and Investments Name of Limited Liability Company  LLC
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kimberly S. Chabrier  Name of Person  V4V REO Property Preservation and Investments, UC  Firm/Company
4700 Sheridan ST, SteJ
Hollywood FL. 38021  City/State and Zip Code  Kinght du Chahair Chahair Languer N
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kinberly Chabrier at 954, 459-0576 Sin Sin Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee  Certificate of Status  Certificate of Status  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

westments, UC The Articles of Organization for this Limited Liability Company were filed on 11 109000113096 Florida document number 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: (Principal office address MUST BE A STREET ADDRESS) 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 records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

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	Kimber	Lil July	
	Signature of a member	er of authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00