## 109000119325

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SECRETARY OF STATE

J. SAULSBERRY EXAMINER JAN 24 2012



## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT:	ADS Real Es	tate Consulting, LLo	C	
		ted Liability Company		
	f Amendment and fee(s) are subsendence concerning this matter			
		Daron Stein		_
		Name of Person		
	ADS R	eal Estate Consulting,	LLC	
Firm/Company				_
	474	7 Collins Ave, Suite 51	16 .	
		Address		201 TA:
	Mia	mi Beach, Florida, 331	40	P 1 2012 JAN SECRET
		City/State and Zip Code		N 23
	adsreale	estateconsulting@gma to be used for future annual repor	il.com	The same
For further information	concerning this matter, please of		(Chotheanon)	MH 8: 04 OF STATE E. FLORIO
ſ	Daron Stein	at ( 646 )	6605223	
	of Person		Daytime Telephone Number	er
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 en	elosed) Certifie	eate of Status &
MAH	LING ADDRESS:	STREET/C	OURIER 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

ADS Real Estate Consulting, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on and assigned L09000119325 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: Lekker Services, LLC 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

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

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

MGR = Manager

tle	<u>Name</u>	<u>Address</u>	Type of Action
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If amend	ding any other information, ent	er change(s) here: (Attach additional sheet	X. if necessary: ORE CREET AN
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Page 2 of 2

Filing Fee: \$25.00