

2100000/426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

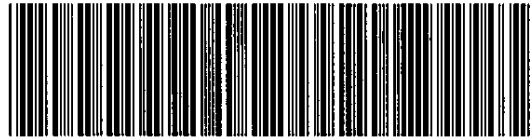
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT
JUL 29 2010
EXAMINER

Office Use Only



500183643105

07/28/10--01011--016 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JUL 28 AM 11:18

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INVENIO PROPERTIES 1, LLC
Name 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:

KELLY SIMPSON
Name of Person

INVENIO CAPITAL
Firm/Company

12801 WESTLINKS DRIVE #201
Address

FORT MYERS, FL 33913
City/State and Zip Code

KSIMPSON@INVENTOCAP.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KELLY SIMPSON at (239) 694-7400
Name of Person Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUL 28 AM 11:18

FILED

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

INVENIO PROPERTIES 1, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2010 JUL 28 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

The Articles of Organization for this Limited Liability Company were filed on 2/1/10 and assigned
Florida document number L100000011426

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

TOP FORECLOSURE SOLUTIONS, 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)

12801 WESTLINKS DRIVE #201
FORT MYERS, FL 33913

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12801 WESTLINKS DR #201
FORT MYERS, FL 33913

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:

KEITH CAMPBELL

New Registered Office Address:

12801 WESTLINKS DR #701

Enter Florida street address

FORT MYERS

City

, Florida

33913

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.

[Signature]
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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	KEITH CAMPBELL	12801 WESTLINKS DR #201 FORT MYERS, FL 33913	<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	THEODORE MUFTIC	12801 WESTLINKS DR #201 FORT MYERS, FL 33913	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

SECRETARY OF STATE
 TALLAHASSEE FLORIDA
 JUL 20 11:13 AM '08

FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____



Signature of a member or authorized representative of a member

KEITH CAMPBELL

Typed or printed name of signee