

L100000/2708

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FILED
TALLAHASSEE, FL 32304

2011 MAR 31 PM 3:15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Grande Appraisals 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:

Jonathan Paul Leogrande
Name of Person
Grande Appraisals LLC
Firm/Company
1044 Big Oaks Blvd
Address
Oviedo, FL 32765
City/State and Zip Code
jleogrande@cfl.rr.com
E-mail address: (to be used for future annual report notification)

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2011 MAR 31 PM 3:15
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Frank Leogrande at (407) 366-9915
Name of Person Area Code & Daytime Telephone Number

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**

Grande Appraisals 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 February 3rd, 2010 and assigned
Florida document number L10000012708.

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)

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2011 MAR 31 PM 3:15
CLERK OF CIRCUIT COURT
JULIA A. SANCHEZ, CLERK

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: Jonathan Paul Leogrande

New Registered Office Address: 1044 Big Oaks Blvd

Enter Florida street address

Oviedo, Florida 32765

City

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.

J.P. Leogrande
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>
MGR	Jonathan Paul Leogrande	1044 Big Oaks Blvd Oviedo, FL 32765	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Jeneen Leogrande	1044 Big Oaks Blvd Oviedo, FL 32765	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Frank Leogrande	1044 Big Oaks Blvd Oviedo, FL 32765	<input type="checkbox"/> Add <input checked="" 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

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

Dated March 28, 2011


Signature of a member or authorized representative of a member

Frank Leogrande

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

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MAR 30 2011
PM 3:15
CLERK