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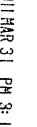
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:		Appraisals LLC ted Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	Joi	nathan Paul Leogrande		2011 MAR 31
		Name of Person		
	G	rande Appraisals LLC		$\widetilde{\omega}$ $\widetilde{\omega}$
		Firm/Company		31 PM :
	1044 Big Oaks Blvd		PH 3: I	
	•	Address		क्षा ज
		Oviedo, FL 32765		
		City/State and Zip Code		
	j) E-mail address: (eogrande@cfl.rr.com to be used for future annual report	notification)	
For further information	concerning this matter, please of		·	
Fr	ank Leogrande	at (407)	366-9915	
Name	of Person	Area Code & Da	aytime 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 enc	losed) Certified	e of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration S Division of C Clifton Buildi	orporations ng ve Center Circle	

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

(Name of the Limited I	rande Appraisals LLC jability Company as it now apper lorida Limited Liability Company				
The Articles of Organization for this Limited Lia Florida document number		February 3rd, 2010	and as	signed	
This amendment is submitted to amend the follow	_	ere:			
The new name must be distinguishable and end with "L.L.C."		pany," the designation "L		-	
Enter new principal offices address, if applica					
(Principal office address MUST BE A STREET	<u> ADDRESS)</u>		70 C		
			\$2.00 -	- i	
			7		
Enter new mailing address, if applicable:			بي چيو) <u>, , , , , , , , , , , , , , , , , , ,</u>	
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>		<u> </u>	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered off Name of New Registered Agent:			he name	of the new	
Name Descriptional Office Address	1044 Big Oaks Blvd				
New Registered Office Address:		Enter Florida street address			
	Oviedo	, Florida	3276	i5	
	City	, Florida	Zip Cod		
New Registered Agent's Signature, if changing Re	egistered Agent:		•		
I hereby accept the appointment as registered the provisions of all statutes relative to the praccept the obligations of my position as regis being filed to merely reflect a change in the recompany has been notified in writing of this c	oper and complete performant tered agent as provided for in egistered office address I her thange.	ce of my duties, and I c Chapter \$08, F.S. Or,	im familia if this doc nited liabi	r with and ument is lity	

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>	Address	Type of Action
MGR	Jonathan Paul Leogrande	1044 Big Oaks Blvd Oviedo, FL 32765	✓ Add Remove
MGRM,	Jeneen Leogrande	1044 Big Oaks Blvd Oviedo, FL 32765	Add Add Remove
MGRM	Frank Leogrande	1044 Big Oaks Blvd Oviedio, FL 32765	Add Remove
			Add Remove
AT			Add Remove
			Add
D. If amer	nding any other information, enter ch	nange(s) here: (Attach additional sheets, if necessa	iriy); <u> </u>
- / -			
_	,		
Dated	March 28	2011 Jakul	
	Signature of a me	mber or authorized representative of a member	
	T	Frank Leogrande yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00