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Division of Corporations

: (850)617-6383

Account Name : GERALD WEINBERG, P.C.

Account Number : 120030000043

: (800)342-9856

Fax Number

: (800)354-3381

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NDL REALTY, LLC

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J. BRYAN

Electronic Filing Menu

Corporate Filing Menu

FEFTep3 2009

EXAMINER

Feb. 22. 2010 1:11PM

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| 9401 | Ρ. | 2 | | |
|------|-----------|-----|--------|---|
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No.

| | NDL RE | ALTY, LLC | | |
|--|---|----------------------|-----------------------------|-------------------------|
| (<u>N</u> | ame of the Limited Liability Com (A Florida Limite | pany as it now appea | rs on our records.) | 99 99 |
| | (A Florida Chimie | a Liability Company) | | <u> </u> |
| The Articles of Organization | for this Limited Liability Compa | ny were filed on | 02/03/2010 | and assigned |
| Florida document number | L10000012924 | | | |
| This amendment is submitted | to amend the following: | | , | |
| A. If amending name, enter | r the new name of the limited li | ability company he | <u>re</u> ; | |
| J | | | | |
| The new name must be distingu"L.L.C." | ishable and end with the words "Li | mited Liability Comp | eny," the designation "L | LC" or the abbreviation |
| Enter new principal offices | address, if applicable: | | | <u></u> |
| (Principal office address MU | <u>IST BE A STREET ADDRESS)</u> | • | | |
| | | | <u> </u> | |
| Enter new mailing address, | if applicable: | | | |
| (Mailing address MAY BE A | | | | |
| | | | <u></u> . | |
| B. If amending the regist | tered agent and/or registered | office address on | our records, <u>enter f</u> | he name of the new |
| | new registered office address h | | | |
| Name of New Regis | stered Agent: | | | , |
| | • | | | |
| New Registered Office Address: Enter Florida street add | | | | ress |
| | | | . Florida | |
| | | City | , FIOLINA | 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.

If Changing Registered Agent, Signature of New Registered Agent

Feb. 22. 2010 1:11PM No. 9401 P. 3

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> | Name | Address | Type of Action |
|---------------|-------------------------------------|---|-----------------|
| MGRM | NICOLETTA DOSSO | 320 Lochen Circle Winter Haven, FL 33884 | Add 7 Remove |
| MGR_ | FELICE DOSSO | 320 Lochen Circle Winter Haven, FL 33884 | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| D. If amendin | ng any other information, enter cha | nge(s) here: (Attach additional sheets, if necessar | 10 FEB |
| way and page | | | EB 22 AM 8: O |
| Dated | 02/22 | 2010 Janene 9: 1 | Simul Simul |
| | Signature of a mem | ber or authorized representative of a member |) - 4 |
| _ | | Lawrence A. Kirsch | |