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COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJI	ECT: For	tune Property Man	agement & Investme	ents, LLC	
		· · · · · · · · · · · · · · · · · · ·	ited Liability Company		
The en	closed Articles of A	mendment and fee(s) are sul	omitted for filing.		
Please	return all correspon	dence concerning this matter	to the following:		
		ADAM I. SKOLNIK, ESQ.			
			Name of Person		
ADAM I. SKOLNIK, P.A.					
			Firm/Company		
	8676 GRIFFIN ROAD				
			Address	,	
		COOP	ER CITY, FLORIDA 33	328	
			City/State and Zip Code	020	
		fortuneprop	pertymanagement@gm	ail.com	
			to be used for future annual report	notification)	
For fur	ther information co	ncerning this matter, please c	all:		
	ADAM I.	SKOLNIK, ESQ.	at (561)	265-1120	
Name of Person			aytime Telephone Number		
	,				
Enclose	ed 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 encl	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations . 6327 see, FL 32314	Registration S Division of Co Clifton Buildi	orporations	

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FORTUNE PROPERTY MANAGEMENT & INVESTMENTS, 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	02/25/2010	and assigned
Florida document numberL10000021937		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company her	<u>re</u> :	
The new name must be distinguishable and end with the words "Limited Liability Compa"L.L.C."	any," the designation	"LLC" or the abbreviation
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 registered agent and/or the new registered office address here:	our records, <u>ente</u>	r the name of the new
Name of New Registered Agent:		
New Registered Office Address:	_	<u> </u>
Ex	nter Florida street a	daren S
	, Florida	RE R T
City		Zip Gode
New Registered Agent's Signature, if changing Registered Agent:		F R
I hereby accept the appointment as registered agent and agree to act in this c the provisions of all statutes relative to the proper and complete performance accept the obligations of my position as registered agent as provided for in C being filed to merely reflect a change in the registered office address, I hereb company has been notified in writing of this change.	e of my duties, and Chapter 608, F.S. C	चिर्मो famliar with and br, if this document is

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	ANTHONY PASSARO	1005 Intracoastal Drive Suite 106	✓ Add Remove
		Highland Beach, Florida 33487	Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if neces	sary.)
_		· - A	
Dated	April 14 ,		10 APR SECRE
	Signature of a	member or authorized representative of a member	ASSE
	***************************************	ADAM I. SKOLNIK, ESQ. Typed or printed name of signee	
		Page 2 of 2	PM 12: 15
		Filing Fee: \$25.00	DM O