11000033390

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
1011 - 221AG					
Special Instructions to Fifth Officer: ** Special Instructions to Fifth Officer: ** AUGUST ENGLISHED GAVE,					
NUTHORIZATION BY PHONE TO					
PRRECT JOW Name					
DATE #85/11					
DCC. EXAN All					

Office Use Only

G. MCLEOD

APR 25 2011

EXAMINER



700201995047

04/18/11--01023--022 **25.00

IT APR 25 PH 3: 09
SECRETARY OF STATE

COVER LETTER,

то:	Registration Section Division of Corporations
SUBJE	Name of Limited Liability Company
The end	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	DEREK RUDARLL Name of Person
	GNAND LEGACY REAL ESTATE, LLC
	955 STARFLOWER AVE
	SEBASTIAN, FL 32958 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For furt	her information concerning this matter, please call:
De	Name of Person at (7D) 433-0197 Area Code & Daytime Telephone Number
Enclose	ed is a check for the following amount:
\$25.	00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & \text{Certified Copy (additional copy is enclosed)}} \text{\$\ \text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \text{\$\ \text{Certified Copy (additional copy is enclosed)}} \$\ \text{Certified Copy (additional

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

CRAND LEGACY X	CAL ESPATE	<i>L</i> -C		
(<u>Name of the Limited Liat</u> (A Flor	ility Company as it now app ida Limited Liability Company	ears on our records.)		
The Articles of Organization for this Limited Liabili	ty Company were filed on _	MARCH 26, 20	and assigned	
lorida document number <u>L1000003533</u>		•		
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liability company l	iere:		
RER PROPERTIES and Con	Bultonaile			
he new name must be distinguishable and end with the L.L.C."	words "Limited Liability Con	npany," the designation "I	LLC" or the abbreviatio	
Enter new principal offices address, if applicable:	955	STARFLO WER	AJE	
Principal office address MUST BE A STREET AI	ODRESS) SEGAS	STARTIONER	32958	
Enter new mailing address, if applicable:		ĀL	or ⇒	
Mailing address MAY BE A POST OFFICE BOX	2	ÄH,	R R	
		\$\$.	APR 25	
3. If amending the registered agent and/or re	wistered office address or	į į	ं ३ ता	
egistered agent and/or the new registered office		27 27) 09	
		DA DA	mi v	
Name of New Registered Agent:				
New Registered Office Address:	55 SMAFEBURE	Ave		
New Registered Office Address: SEGISTIAN Florida 32958				
	SEBASTIAN	, Florida	32958	
	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.

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 '

<u>`itle</u>	<u>Name</u>	<u>Address</u>	Type of Actio
			Add Remove
			Add Remove
			Add Remove
<u></u>			Add Remove
			Add Remove
			Add Remove
If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.) .	
			_
_			_
ated	APRIC 15 Don't	- pulgur	
	Denek A	or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00