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(Requestor's Name)						
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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	CT. BARB SANDERS REAL ESTATE INV. LLC				
SUBJ	Name of Limited Liability Company				
The en	losed Articles of Amendment and fee(s) are submitted for filing.				
Please	eturn all correspondence concerning this matter to the following:				
	KRISTINE RUSSELL				
	Name of Person				
SWEAT & OLSON, P.A.					
Firm/Company					
2018 SOUTH FLORIDA AVENUE					
Address					
LAKELAND, FLORIDA 33803					
City/State and Zip Code					
	ricebar@msn.com E-mail address: (to be used for future annual report notification)				
For fu	ner information concerning this matter, please call:				
	GREG H. SANDERS at (813) 967-7109 Name of Person Area Code & Daytime Telephone Number				
Enclos	d is a check for the following amount:				
\$2 :	00 Filing Fee \$\ \text{S30.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \\ \text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)} \\ \text{Certified Copy (additional copy is enclosed)} \end{additional copy is enclosed}				

MAILING ADDRESS:

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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

BARB SAND	ERS REAL ESTATE	INV. LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now app orida Limited Liability Company	ears on our records.)		
The Articles of Organization for this Limited Liabi	–	03/29/2010	and assig	gned
Florida document numberL1000003381	<u>1</u> .		-	
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company h	<u>iere</u> :		
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Con	npany," the designation "I	LLC" or the ab	breviation
Enter new principal offices address, if applicable	<u> </u>			
(Principal office address MUST BE A STREET A	DDRESS)			
	All the state of t			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO)			-	
			·····	
B. If amending the registered agent and/or r		our records, enter t	the name of	the new
registered agent and/or the new registered office	address here:		19 P	
Name of New Registered Agent:			RETAIN ATTACK	
New Registered Office Address:			Gentle St.	1.7.1
•	À	Enter Florida street add	Pass: 14	
• –	City	, Florida	<u>⊅≥</u> Zlp C o de	

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

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 Title Title <u>Name</u> Address Type of Action **MGRM** BARBARA M. SANDERS 2742 W PIPKIN ROAD Add Remove LAKELAND, EL 33811 GREG H. SANDERS MGRM 2742 W PIPKIN ROAD LAKELAND, EL 33811 Remove Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **NOVEMBER 19** 2010 Signature of a member or authorized representative of a member * BARBARA M. SANDERS

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00