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T. HAMPTON JUN 1 i 2010 EXAMINER

COVER LETTER

Registration Section
Division of Corporations

TO:

CENTURION REALTY GROUP LLC					
	Name of Limi	ted Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
CENTURION REALTY GROUP LLC					
	<u> </u>				
14617 Avenue of the Rushes					
Winter Garden, FL 34787					
		City/State and Zip Code			
	das	swanip@thinkcfcg.com			
	E-mail address: (to be used for future annual report notificati	on)		
For further information	concerning this matter, please of	eall:			
S	emir R Nayar	at (407) 810) - 0640		
	of Person	Area Code & Daytime Te	lephone 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 enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)		
Regis	LING ADDRESS: tration Section	STREET/COURIER Registration Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	RION REALTY GROUP			
(Name of the Limited Li (A F)	ability Company as it now appeal orida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Company were filed on 05/17/2010 and and and				
Florida document numberL100000526	<u>68</u> .			
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	ne limited liability company her	<u>те</u> :		
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Compa	any," the designation "LL	.C" or the abb	reviation
Enter new principal offices address, if applicab	le:			
(Principal office address MUST BE A STREET.	ADDRESS)		· · ·	<u> </u>
	- <u> </u>	<u></u>	<u>_</u>	<u> </u>
			₹	2000
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u></u>		7	
				98. 1.8
			(3) (2)	317
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter th</u>	e name of t	<u>:he new</u>
Name of New Registered Agent:				
New Registered Office Address:	Fy	nter Florida street addre	255	
	Lif			
	City	, Florida	Zip Code	·-
New Registered Agent's Signature, if changing Re	•		_p 2000	

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 <u>Title</u> <u>Name</u> **Address** Type of Action Michael J Carulli **MGRM** 2338 MEADOW OAK CIRCLE **✓** Add KISSIMMEE FL 34746 US Remove Prithi Daswani MGR 14617 Avenue of the Rushes ✓ Add Winter Garden, FL 34787 US Remove ☐ Add Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) THE EMPLOYER IDENTIFICATION NUMBER 15: 27-2802322 Signature of a member or authorized representative of a member Semir R Nayar

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Typed or printed name of signee

Filing Fee: \$25.00