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COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT: Real A	Abundance, LLC		
Sobolett.	Name of Limited Liability Company		
The enclosed Articles of Ar	mendment and fee(s) are submitted for filing.		
Please return all correspond	dence concerning this matter to the following:		
	Mike Boggs		
	Name of Person		
	Real Abundance		
	Firm/Company		
	1730 South Federal Highway #382	2014	
	Address	2014 JAN	1
	Delray Beach, Florida 33483	N-2	d Tagg
	City/State and Zip Code	A R	2
	E-mail address: (to be used for future annual report notification)	PH 1:54	ř.
For further information con	cerning this matter, please call:	异的 手	
Mike Boggs	at 814 977-0986		
Name of F	Person Area Code Daytime Telephone Number	_	
Enclosed is a check for the	following amount:		

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□\$30.00 Filing Fee &

Certificate of Status

■ \$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Dool	Ab.	ındance.	110
Real	AUL	muance.	LLU

(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	ty Company were filed on 6/8/2010	and assigned
Florida document number L10000061261	·	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the de	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office:	-	ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	street address
_	, , , , , , , , , , , , , , , , , , , ,	Florida
	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 605, 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 Authorized Member on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address <u>T</u>	ype of Action
MGR	Onyx Coale	1730 S. Federal Highway #382	Add
		Delray Beach,Fla. 33483	Remove
MGR	Mike Boggs	1730 S. Federal Highway #382	Add
		Delray Beach, Fla. 382	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
		·····	Add
			Remove
		100 mm	2 PM

,	•	Q 1,7	: (Attach additional sheets, if necessary.)	
,				
E. Effective	e date, if other than the date o	f filing: 11/27/2 se specific and cannot	2013 (optional) ot be more than 90 days after filing.) (605	.0207 (3)(b)
	vember 27th,			
	j			
	Signature	of a member or author	rized representative of a member	
		O.yx Cogue		
		Typed or printed	I name of signee	
		**		

Page 3 of 3

Filing Fee: \$25.00

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