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Office Use Only



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T. HAMPTON OCT 2 2 2010 EXAMINER

COVER LETTER

TO:	Registration S Division of Co	Section prporations . ,	,				
SUBJECT: Florida Gateway Realty, LLC							
50141			ted Liability Company				
The en	closed Articles o	of Amendment and fee(s) are sub	omitted for filing:				
Please	return all corresp	condence concerning this matter	to the following:				
			Judith Dunne				
			Natic of Letroit				
Flor			da Gateway Realty, LLC				
			Firm/Company				
			2751 Hillsdale Ave				
Largo, FL 33774							
			City/State and Zip Code				
		judy	dun@tampabay.rr.com to be used for future annual report notifi				
For fur	ther information	concerning this matter, please of	•	. · · · · · · · · · · · · · · · · · · ·			
		Judy Dunne	at (727)	585-6732			
	Name	of Person	Area Code & Daytim	e Telephone Number			
Enclos	ed is a check for	the following amount:					
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee; FL 32	n ations enter Circle			

ARTICLES OF AMENDMENT TO-ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF GORPORATIONS

10 00T 21 MII: 82

(Name of the Lin	Florida Gateway Real	y, LLC		
(14 mile of the Lin	nited Liability Company as it no (A Florida Limited Liability Co	mpany)		
The Articles of Organization for this Limit	ed Liability Company were filed	l on 8/4/2010	and assigned	
Pionda document number				
This amendment is submitted to amend the	following:			
A. If amending name, enter the new nar	me of the limited liability comp	pany here:		
The new name must be distinguishable and en "L.L.C."	d with the words "Limited Liabili	ty Company," the designation	*LLC" or the abbreviation	
Enter new principal offices address, if ap	pplicable:			
(Principal office address MUST BE A ST	REET ADDRESS)			
Enter new mailing address, if applicable	:			
(Mailing address MAY BE A POST OFF)	ICE BOX)	· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent a registered agent and/or the new registered		ess on our records, <u>enter</u>	the name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
Now Registered Office Fiduress.		Enter Florida street address		
		. Florida		
	City	, * 101 NIA _	Zip Code	
New Registered Agent's Signature; if change	ing 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	<u>Name</u>	Address	Type of Action				
MGR	Robert Calistri	3025 Wister Circle Valrico, FL 33596	Add Remove				
			Add Remove				
			Add Remove-				
			Add Remove				
			Add Remove				
			Add Remove				
D. If ame	ending any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	FILESPER TARN VISION OF 6				
-			ILED RY OF STATE CORPORAT				
-	- 10 tr		_ Ro TONS				
Dated	Koren,		Merubers				
	_	member or authorized representative of a member Authorized representative of members					
	Naien walle,	Typed or printed name of signee					

Page 2 of 2

Filing Fee: \$25.00-