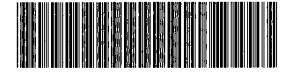
L10000/06747

| (Re | questor's Name) | | |
|---|-------------------|-------------|--|
| (Ad | dress) | | |
| (Ad | dress) | | |
| (Cit | y/State/Zip/Phon | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | siness Entity Nar | me) | |
| (Do | cument Number) | | |
| Certified Copies | _ Certificate: | s of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Office Use Only



500188440065

12/10/10--01024--012 **25.00

SECRETARY OF STATE

anner gr ganner ganner gr ganner gr ganner ganner ganner gr ganner g

T. CLINE

DEC 1 3 2010

EXAMINER

COVER LETTER

| | on Section of Corporations | | | | |
|----------------------------|---|---|---------------|--|--|
| SUBJECT: | REAL ESTATE FIN | IANCIAL ANALYSTS, LLC | | | |
| Sobsect. | | nited Liability Company | | | |
| | | | | | |
| The enclosed Articl | les of Amendment and fee(s) are su | bmitted for filing. | | | |
| Please return all con | rrespondence concerning this matte | er to the following: | • | | |
| | | • | | | |
| | M | ATTHEW ROTHSTEIN | | | |
| | | Name of Person | | | |
| • | DEAL ESTA | TE EINIANICIAL ANIALVOTO LL | C | | |
| | REAL ESTA | TE FINANCIAL ANALYSTS, LL Firm/Company | <u></u> | , J. | |
| | | | | | |
| | 380 | 00 N HILLS DR UNIT 404 Address | | | |
| | | Address | | t | |
| | Н | OLLYWOOD/FL 33021 | | 200 A | |
| • | | City/State and Zip Code | . } | | |
| - | E-mail address: | ATTBR83@AOL.COM (to be used for future annual report notification | <u>m)</u> | 2010 DEC 10 SECRETARY ALL ALLSSE | |
| For further informa | tion concerning this matter, please | | | | |
| roi iuithei mioima | | can, | | PHI2: | |
| | TTHEW ROTHSTEIN | at \ | 04856 | : 39 A | |
| N | ame of Person | Area Code & Daytime Tele | ephone Number | . 4 | |
| | | | | | |
| Enclosed is a check | for the following amount: | | | | |
| ▼ \$25.00 Filing Fe | ee \$\sum \$\\$30.00 \text{ Filing Fee & Certificate of Status} | \$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy Certificate of Status & | | | |
| | | (additional copy is enclosed) | Certified Cop | | |
| · N | IAILING ADDRESS: | STREET/COURIER A | ADDRESS: | | |
| Registration Section | | Registration Section | | | |
| U | vivision of Corporations | Division of Corporation | 12 | | |

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REAL ESTATE FINANCIAL ANALYSTS LLC.

| (Name of the Limited Liability | Company as it now appear Limited Liability Company) | | | | |
|--|--|------------------------|----------------|-----------------------|--|
| ` ' | • | | | | |
| The Articles of Organization for this Limited Liability C | ompany were filed on | 1:2/6/2010 | and assi | igned | |
| Florida document numberL10000106747 | <u></u> . | | | | |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the limi | ted liability company her | <u>e</u> : | | | |
| The new name must be distinguishable and end with the wor "L.L.C." | ds "Limited Liability Compa | ny," the designation " | 'LLC" or the a | bbreviation | |
| Enter new principal offices address, if applicable: | | <u> </u> | | <u> </u> | |
| (Principal office address MUST BE A STREET ADDR | YESS) | | | | |
| | | | 7. 6 | | |
| | | | 232C | | |
| Enter new mailing address, if applicable: | | | | Personal Land | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | <u> </u> | Memoria with sevia | |
| • | | | | | |
| | _ | | 70 | | |
| B. If amending the registered agent and/or regist | ered office address on o | our records, enter | file name o | f the nev | |
| registered agent and/or the new registered office add | ress here: | , | 39 | | |
| | | | r | | |
| Name of New Registered Agent: | | | | | |
| New Period Office Address | | | | • | |
| New Registered Office Address: | En | ter Florida street ad | dress | | |
| | , 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 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 MGRM = Managing Member **Title** <u>Address</u> **Type of Action** <u>Name</u> **MGMR ALEX MORCATE** 114 4TH TERRACE RIVO ALTO ✓ Remove MIAMI BEACH, FL 33139 ☐ Add Remove ☐ Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 2010 Dated_ Signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00

MATTHEW ROTHSTEIN