## L10000110656

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Special Instructions to	Filing Officer:	
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06/06/11--01007--006 \*\*25.00

J. SAULSBERRY **EXAMINER** 

JUN 7 2011

## **COVER LETTER**

Registration Section

TO:

Division of C	Corporations	•		
SUBJECT:	RESORT F	RESOLUTION LLC		
	Name of Lim	ited Liability Company		
	of Amendment and fee(s) are su	_		
	<u> </u>	CRAIG ANDERSON		_
•		Name of Person		
	RESORT RESOLUTION LLC		_	
		Firm/Company		
	13506 SU	IMMERPORT VILLAG	E PKWY	
		Address		- 
	WI	NDERMERE, FL 3478	86	2011 JUN-6 SECRETAR TALLAHASS
		City/State and Zip Code		
	realtyresol	utionmanagement@gi	mail.com	SS -6
	E-mail address:	(to be used for future annual repo	ort notification)	The state of the s
For further informatio	n concerning this matter, please	call:		PM 1:52
(	Craig Anderson	at ( 800 )	7798301	52 NBA
Nam	e of Person		Daytime Telephone Numbe	er
Enclosed is a check for	r the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	nclosed) Certifie	ate of Status &
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration Division of Clifton Buil	Corporations Iding Itive Center Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RESORT RES				
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appear Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Company	y were filed on	10/22/2010	and assig	ned
Florida document numberL10000110656				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company her	<u>e</u> :		
REALTY RESOLUTION		_		
The new name must be distinguishable and end with the words "Lin" L.L.C."	nited Liability Compa	ny," the designation "	'LLC" or the ab	breviatio
Enter new principal offices address, if applicable:			A B	
(Principal office address MUST BE A STREET ADDRESS)			See See	11
	<del></del>		<u> </u>	A Constant
			SEE SEE	m
Enter new mailing address, if applicable:			PH PH	A Property of
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>		PATE 52	
			\$ N	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address he		ur records, <u>enter</u>	the name of	the new
Name of New Registered Agent:				
New Registered Office Address:				
	Ent	er 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	KEY ISLE TRUST LLC	13506 SUMMERPORT VILLAGE PKW WINDERMERE, FL 34786	Add
MGRM_	ASSET RESOLUTION MAI	13506 SUMMERPORT VILLAGE PKW WINDERMERE, FL 34786	Add Remove
			Add Remove
<del></del>			Add Remove
	<u>.</u>		Add Remove 
D. If amer	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	Add Remove
<u>c</u> 	HANGE NAME TO: REALTY RE	SOLUTION MANAGEMENT LLC	IL CE I
_			<b>52</b>
Dated	JUNE 2 , 20	011 . '	
	Signature of a member	er or authorized representative of a member	<del></del>
		RAIG ANDERSON	
	Typed	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00