Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SMALL BUSINESS RESOURCES USA, INC.

Account Number : I20040000173

: (407)298-4646

Fax Number

: (407)297-0588

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BRENNAN REALTY GROUP, LLC

Certificate of Status	1
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FAX AUNT # 4140000 328993

COVER LETTER

TO:

Registration Section Division of Corporations

CY IN THE COT.

Brennan Realty Group, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

James K. Duerr, CPA

Name of Person

Small Business Resources USA, Inc.

Firm/Company

1601 Park Center Dr., Ste. 6A

Address

Orlando, FL 32835

City/State and Zip Code

JimD@sbrorlando.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James K. Duerr, CPA

,407,298-4646

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

CI \$25.00 Filing Fee

S30.00 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)

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FAX AVOIT# H14000032899 3

AX AUDIT # H/4000032899 3 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Brennan Realty Group, LLC		
Name of the Limited Liability Company (A Florida Limited Us	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company w	ore filed on 01/28/2011	and assigned
Florida document number L11000012197		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
The new name must be distinguishable and end with the words "Limited Liabili	ity Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		-1
(Principal office address MUST BE A STREET ADDRESS)	**************************************	
		3+ 1/ [T/] 1 -+[//24
Enter new mailing address, if applicable:		54. O mr <u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		in the second se
	417	ent to the
		ကြေး ပြဲ
B. If smeuding the registered agent and/or registered office registered agent and/or the new registered office address here:		the name of the new
		•
Name of New Registered Agent:		-
New Registered Office Address:		
	Enter Florida street address	
-	, Florida	
	Citv	7In Code

New Rogistered 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

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FAX AUDIT # H140000328993

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member Type of Action Address Title Name 1583 E. Silver Star Rd. **MGRM** Dream House Holdings, Inc. Suite 209 Remave Ocoee, FL 34761 1583 E. Silver Star Rd. **MGRM** Dream House Group, LLC Suite 209 ☐ Remove Ocoee, FL 34761 DbA 🗆 □ Remove Add 🗖 To Remove ... O □ Add □ Remove □ Add □ Remove

Page 2 of 3

alterrating any other into mation	i, enter change(s) here: (Attach addit	ional sheets, if necessary.)
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fective date, if other than the dat	e of filing: Immediately	(optional)
fective date, if other than the dat e effective date must be specific, cunnot be e date this document is filed by the Florida	te of filing: Immediately s prior to date of receipt or filed date and cannot a Department of State)	(optional) be more than 90 days after
Mective date, if other than the dat is effective date must be specific, curnor be to the this document is filed by the Floridated February 10	e of filing: Immediately prior to date of receipt or filed date and cannot Department of State) 2014	(optional) be more than 90 days after

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Lynn A. Thompson, VP Dream House Holdings, Inc.

Filing Fee: \$25.00