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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Grace Estate Buyers and Auctions 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:
Paul Bacattini Name of Person
Grace Estate Buyers and Auctions LLC Firm/Company
1500 Apalachec Pkny #2450
Talluhussee, FL 32301 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Paul Balattini at (850) 567-46530 5 730 75 750 750 750 750 750 750 750 750 750
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status} \text{Certificate of Status} \text{Certificate Opy} \text{Certificate of Status} Certificate of Stat

MAILING ADDRESS:

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

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Grace Esta (Name of the Limited Liab (A Flori	ility Company as it now appears on ida Limited Liability Company)	d Auctions WC
The Articles of Organization for this Limited Liability Florida document number <u>L1100002312</u>	y Company were filed on	
This amendment is submitted to amend the following	;	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and end with the "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET AD		the designation "LLC" or the abbreviation
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		A PH 2:1
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our address here:	records, enter the come of the new
Name of New Registered Agent: New Registered Office Address:	M Emer F	lorida street address
	C:	, 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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Aut	horized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
Mr. AMRP	Matthew Baratini	1500 Apalachee pkuy	Add
717 - 12 12		#2450	Remove
_	2	Tallahussee FL 32301	_
MARM	Paul Baratini	1500 Apalachec PKWy	_
		#2450	Remove
		Tallahassec, FL 3230	
Mrs.	Winnified Barattini	1500 Apalachec Pru	Y Add
AMBR		#2450	Remove
		Tallahassee, FC 32301	-
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			Remove

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