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RECRETARY OF STATE ALLAHASSEE, FLORIDA

D. BRUCE
NOV 29 2011
EXAMINER

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	CORCORAN Real Estate, LLC Name of Limited Liability Company		
The enclosed Articles of	Amendment and fee(s) are submitted for filing.		
Please return all correspondence	ondence concerning this matter to the following:		
	JEANINE CORDORAN Name of Person		
	CORCORAN Real Estate, LLC Firm/Company		
	3305 Primrose Willow Dr		
	City/State and Zip Code JEAnine Corcorn Damail E-mail address: (to be used for future annual report notification)	SECRETARY OF ST TALLAHASSEE, FLO	: 71
	E-mail address: (to be used for future annual report notification)	ASSE ASSE	F
For further information c	oncerning this matter, please call:		П
Jeanine Name o	Area Code & Daytime Telephone N	HASSEE, FLORIDA	
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	Certificate of Status Certified Copy Ce (additional copy is enclosed)	00 Filing Fee, ertificate of Status & ertified Copy Iditional copy is enclose	sd)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CORCORAN Rea	V as it now appears on our records.) iability Company)
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company	were filed on <u>4-4-11</u> and assigned
Florida document number <u>L 1 1 0006 39827</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
TEANINE (OR CORAN The new name must be distinguishable and end with the words "Limit	REAL Estate, LLC
The new name must be distinguishable and end with the words "Limit "L.L.C."	_
Enter new principal offices address, if applicable:	390 No. Orange Are Suite 230 OKLANDO FL 32801
(Principal office address MUST BE A STREET ADDRESS)	OKLANDO FL 32801
Enter new mailing address, if applicable:	2205 Princes 111 11 11
(Mailing address MAY BE A POST OFFICE BOX)	3305 Primrose Willow Dr Harmony FL 34773
Maung unitess MAI BE A FOST OFFICE BOAJ	13411110119 FL 34113
B. If amending the registered agent and/or registered off	ice address on our records, enter the new
registered agent and/or the new registered office address here	same Same
Name of New Registered Agent:	SS 2
New Registered Office Address:	The second secon
	Enter Florida street addres :
	, Florida Zin 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: SAME MGR = Manager MGRM = Managing Member Title <u>Name</u> **Address Type of Action** ☐ Add ☐ Remove ☐ Add Remove ☐ Add Remove □ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 11-22-11 EANINE A CORCURAN
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00