

L11000043340

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

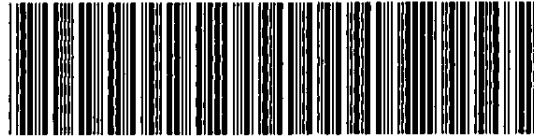
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JUN 30 PM 1:51

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J. SAULSBERRY
EXAMINER

JUN 30 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ivorystone Property, 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:

Veronica Martin

Name of Person

Ivorystone Property, LLC.

Firm/Company

735 Monaco P

Address

Delray Beach, FL 33445

City/State and Zip Code

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

For further information concerning this matter, please call:

V.M. Veronica Martin
E-mail: Margaret Mallin
Name of Person

239 - 245 - 3776
at 954 658-5366 8m
Area Code & Daytime Telephone Number

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Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Ivorystone Property, LLC.

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 12, 2011 and assigned Florida document number L11000043340.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Blackstone Realty Group, LLC.

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

Not Applicable

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

Not Applicable

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Not Applicable

New Registered Office Address:

Not Applicable

Enter Florida street address

_____, 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.

Not Applicable

If Changing Registered Agent, Signature of New Registered Agent

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	Name	Address	Action
	Not Applicable		<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Not Applicable

Dated _____, _____

Veronica Martin

Signature of a member or authorized representative of a member

Veronica Martin

Typed or printed name of signer

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TALLAHASSEE, FLORIDA


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2011-06-30 11:00

Wachovia Bank

2392264664 >>

850 245 6030 P 2/2

VERONICA A MARTIN 12426 Pebble Stone Ct Fort Myers, FL 33913 239-245-3776		1062 83-751/831 BRANCH 01753
Date <u>4-28-2011</u>		
PAY to the order of <u>Division of Corporations</u> \$ <u>25.00</u> <u>Twenty five dollars</u> Dollars		
 WACHOVIA Wachovia Bank, a division of Wells Fargo Bank, N.A.		
For <u>Veronica Martin</u>		
MICR: ⑆063107513⑆1010253271361⑆ 1062 ⑆00000002500⑆		

MAY -4 11
 BANK OF AMERICA NA
 1110001334 26172 94
 05/03/11-01041--020
 009-4600000-1009068796
 DEPOSIT ONLY 25.00

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

21931 62528 2011 JUN 30 PM 1:51

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Account	Date	Amount	Serial Number	Sequence	Status
000001010253271361	5/4/2011	\$25.00	00000000001062	00000000006857900320	Posted Items

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