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SECRETARY OF STATE
ANASSEF, FLORIDA

C. LEWIS

AUG - 9 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: RESTIVO + RETLLY 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:
Bernadette Restruo, Managing Partner Restruo + Reilly LLC Firm/Company
103400 Overseas Hwy #237 Key Largo FL 33037 City(Stitle and Zip Code Bernadette @ Restruction) E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bernade He Restuo at (305) 453-4961 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & 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

Restivo	+ Reilly		2011 AUG - 8 PM 6 35	
(<u>Name of the Limited L</u> (A F	iability Company as it now a lorida Limited Liability Comp	appears on our re pany)	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
The Articles of Organization for this Limited Liab		n <u>5/16</u>	and assigned	
Florida document number L 11 0000	<u>588</u> 03.	1.	•	
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of the	he limited liability compar	ı <u>v here</u> :		
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability (Company," the des	signation "LLC" or the abbreviation	
Enter new principal offices address, if applicab	le:			
(Principal office address MUST BE A STREET.	ADDRESS)			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BO	<u></u>			
		 		
B. If amending the registered agent and/or registered agent and/or the new registered offic		on our record	s, enter the name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
		, F	lorida	
	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MGR</u> /	Bernado He Restro PA	103400 Overseas Hwy 237 Reylargo, FL 33037	Add Remove
			Add Remove
			Add Remove
+-			Add Remove
+			Add Remove
\int			Add Remove
_		here: (Attach additional sheets, if necessary.)	
<u> </u>	idd member:		_
	Bernadette	Restivo PA	_
	103400 nuero	seas Hwy # 237	
	Key LARGO, F	33037 5	- 2
	,	Fig.	
Dated	7-31-11	HASSEE	GARY COLOR
_	1 >		S E C
		authorized representative of a member Restruction Porinted name of signee	ATE
	¥1 1	<u> </u>	

Page 2 of 2

Filing Fee: \$25.00