11000082006

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					

Special Instructions to Filing Officer:

L. SELLERS

AUG - 8 2011

EXAMINER

Office Use Only



900210572619

08/03/11--01021--023 **30.00



COVER LETTER

Division of Co				
SUBJECT:	Davies	Realty, LLC		
Name of Limited Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	nitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		Nicolina Davies		
		Name of Person		
Davies Realty, LLC				
		Firm/Company		
		504 Catania Lane		
		Address		
	F	Poinciana, Fl. 34759		
		City/State and Zip Code		
	Famail address: (te	nikki@mysolivita.us be used for future annual report notificat	ion)	
For further information	concerning this matter, please ca		,	
Nicolina Davies		at (_407) 57	72-1687	
Name of Person		Area Code & Daytime Telephone Number		
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

Davies Realty, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) July 18, 2011 The Articles of Organization for this Limited Liability Company were filed on and assigned L11000082066 Florida document number ____ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if 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: New Registered Office Address: Enter Florida street address City

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.

New Registered Agent's Signature, if changing Registered Agent:

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 Type of Action Nicolina Davies** MGRM 504 Catania Ln. Poinciana, Fl. ☐ Add ✓ Remove Nicolina Davies MGR 504 Catania Ln. Poinciana, Fl. ✓ Add □ Remove MGR Richard J. Davies 504 Catania Ln., Poinciana, Fl. √ Add ☐ Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July 30 2011 Dated_ Signature of a member or authorized representative of a member Nicolina Davies Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00