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B. BOSTICK

OCT 1 8 2011

EXAMINER

## **COVER LETTER**

Division of Corporations		
SUBJECT: PROperty Stewards Reply, 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:		
Debornh A. Wartson Name of Person		
Propenty Stewards Realty, LLC		
4615 Trond River King		
Ellerton, 7 C 34222  City/State and Zip Code		
Deboraha Property Stewards Realty Ecost Femiliaddress: (to be used formula report notification)		
For further information concerning this matter, please call:		
Doborul W. Water at (813) 215-02-49 5 5 Name of Person at (813) 215-02-49 5 5		
Enclosed is a check for the following amount:		
\$25.00 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:** 

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**Registration Section** 

TO:

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

Troponty Stewards	Realty, 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 of Florida document number	were filed on July 15, 20 Hz and assigned	
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:	4615 TROJET RIVER King	
(Principal office address MUST BE A STREET ADDRESS)	- Ellenton, 7C 34225	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8955 US Hwy 201 N #161 PARRISH, FL 34219	
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:  4015	Travet River King	
Ellen	Enter Florida street address    Herrida 34222  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 **Type of Action Title Address** <u>Name</u> Remove MCXRM Kemove ☐ Add Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00