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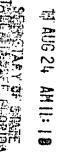
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
, (Document Number)				
Certified Copies Certificates of Status				
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AUG 2 5 2011				
EXAMINER				

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COVER LETTER

Division of Co	rporations		
SUBJECT:	REALTYTIP, LLC		
SOBSECT:		ited Liability Company)	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Cedric Tippe		
		(Name of Person)	
		(Firm/Company)	
	4340 Beechw	ood Circle	
		(Address)	
	Weston, FL 3		
		(City/State and Zip Code)	
For further information	concerning this matter, please c	ali:	
Cedric Tippenhauer		at (954) 217.3056	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	the following amount:		
2 \$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

TO:

Registration Section

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

REALTYTIP, LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number L 11000085254		_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LLC	" or the abbreviation
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 here		name of the new
N 07 P 14 14		
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida street addre	2
	(Direct 1 for the birect date of	" 章 ጠ
	, Florida	Zin Code :
New Registered Agent's Signature, if changing Registered Agent:	(0.0)	

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
MGRM	Fritz Tippenhauer	4340 Beechwood Circle	⊠ Add
		Weston, FL 33339	☐ Remove
MGRM	Marie Michael Tippenhauer	4340 Beechwood Circle	
,		Weston, FL 33339	☐ Remove
MGRM (Cedric Tippenhauer	4340 Beechwood Circle	· Ø Add
		Weston, FL 33339	☐ Remove
			□ Add
	***************************************		☐ Remove
			□ Add
			☐ Add
			☐ Remove
D. If amendi	ng any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	.)
			<u> </u>
		,	

Dated August 18	st 18 , 2011	•	
	alle Sifeth		
_	Signature of a member	er or authorized representative of a member	
_	Cedric Ti	ppenhauer	
_	Турес	d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00