11000094907

(Requestor's Name)				
(Address)				
(Ad	dress)			
(City/State/Zip/Phone #)				
	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
JUL! 2 4 2012				
L. SELLERS				

Office Use Only



500236908655

07/19/12--01013--007 **30.00

12 JUL 19 AH 6: 12
SECRETARY OF STATE
IN I AHASSEE, FLORIDA

COVER LETTER

11

TO: Registration Sect Division of Corpo		•	
SUBJECT: OLZ	LIE LEAL Name of Limit	ESHATE LA ed Liability Company	LC
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	MICHA	EL OLIVEIR Name of Person	4
	1700	Firm/Company	
	1/05	TURKEY CREE Address + City FL City/State and Zip Code	K KOAC
	PLAN.	+ City, FL	33566
		City/State and Zip Code O1576 A04. o be used for future annual report notifical	COM
For further information con	ncerning this matter, please ca	·	,
MICHAEL C Name of F	LIVEIRA Person	at (6/3) 9/7 - Area Code & Daytime T	678/ Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	Certificate of Status Check# 2219	\$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

1.BACCO JOUR		LLC
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our in Liability Company)	records.)
The Articles of Organization for this Limited Liability Company Florida document number		2011 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
OLLIE REAL ESTATE.	LLC	
The new name must be distinguishable and end with the words "Lim" "L.L.C."	ited Liability Company," the d	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1705 TUR	CKEY CREEK RO
(Principal office address MUST BE A STREET ADDRESS)	PLANTCIT	4 , FL 33566
Enter new mailing address, if applicable:	SAME AS	ABOYE
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		Five and
	-	OF ST
Name of New Registered Agent:	·····	ATE RID.
New Registered Office Address:		
_	Enter Florid	la 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.

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 = Mar MGRM = M	nager Ianaging Member	•	
<u>Title</u>	Name	Address	Type of Action
	 		Add
		•	
			Add Remove
 .			Add Remove
	• • · · · · · · · · · · · · · · · · · ·		Add
			Add
			Remove
			Add Remove
D. If amend	ing any other information, enter c	hange(s) here: (Attach additional sheets, if neces	ssary.)
	T.1., 12	2012	
Dated	July 12 m		·
	MICHAE	ember or authorized representative of a member LOLIVEILA Typed or printed name of signee	·

Page 2 of 2

Filing Fee: \$25.00