L11000102028

•						
(Requestor's Name)						
(Address)						
(Address)						
, ,						
(City/State/Zip/Phone #)						
(6.1) 6.1.6.1.1,						
PICK-UP WAIT MAIL						
(Queing a Finish, Marra)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
·						
·						

Office Use Only



200238287162

09/04/12--01019--018 **25.00

D. BRUCE SEP 0 5 2012 EXAMINER

COVER LETTER

*;

то:	Registration Section of Con					
SUBJE	CT:	M A Real	Estate of LA LLC			
Name of Limited Liability Company						
The end	closed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please 1	eturn all correspo	ondence concerning this matter	to the following:			
		J	ohn Nathan Baschieri			
Name of Person						
M A Real Estate of LA LLC						
Firm/Company						
3507 Lee Blvd #212						
Address						
		Le	ehigh Acres, FL 33971			
City/State and Zip Code					₹ _C	
leeforeclosures@gmail.com					ECF SSI	
		E-mail address: (to be used for future annual report notification)		ART ART	API
For furt	her information of	concerning this matter, please of	call:		ASSEA	EASO EASO
	Mi	elinda Lopez	at (239) 288-	0516		
Name of Person			Area Code & Daytime Telep		12: 59 STATE FLORIDA	<u>_</u>
Enclose	ed is a check for t	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 Sta Certified Copy (additional copy		

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

	M A Real Estate of	f LA LLC			
(<u>Na</u>	me of the Limited Liability Company as it (A Florida Limited Liability	t now appears y Company)	on our records.)		
	or this Limited Liability Company were	filed on	09/07/2011	and assigned	
Florida document number	L11000102028				
This amendment is submitted	to amend the following:				
A. If amending name, enter	the new name of the limited liability co	ompany here	:		
The new name must be distinguing. "L.L.C."	shable and end with the words "Limited Lia	ability Compar	y," the designation "L	LC" or the abbrevia	_ tion
Enter new principal offices a	nddress, if applicable:			SEC	_
(Principal office address MU	ST BE A STREET ADDRESS)			<u> </u>	—-r1
				SS F	-E-2
					ici C
Enter new mailing address,	if applicable:			F.S. 75	_
(Mailing address MAY BE A	POST OFFICE BOX)			20 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
B. If amending the regist	ered agent and/or registered office a	ddress on o	ur records, enter t	he name of the r	– 1ew
	new registered office address here:				
Name of New Regis	tered Agent:				_
New Registered Offi	ce Address:				_
		Ente	er Florida street add	ress .	
			, 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action** Title Name **Address** Jerold Bakelman MGR 3507 Lee Blvd #212 ☐ Add Lehigh Acres, FL 33971 ✓ Remove Joyce Gregory MGR 3507 Lee blvd #212 **✓** Add Remove Lehigh Acres, FL 33971 ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member John Nathan Baschieri Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00