11000125904

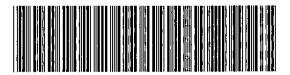
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EXAMINER



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11/07/11--01027--003 **55.00

TO ACKROWLEDGE



CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE . TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT, #FCA-14 CONTACT: **RICKY SOTO** DATE: 11/07/2011 **REF. #:** 001668.156834 CORP. NAME: E1ST PROPERTIES, LLC changing its' name to ELST PROPERTIES, LLC () ARTICLES OF INCORPORATION (XX) ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 542096 FOR \$ 55.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$____

() CERTIFICATE OF GOOD STANDING () PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

PLEASE RETURN:

(XX) CERTIFIED COPY

Examiner's Initials

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Month of the State of the State

E1ST PROPERTIES, LLC 会				
(Name of the Limited Liability Compan (A Florida Limited Li	RTIES, LLC y as it now appears on our records.) ability Company)			
The Articles of Organization for this Limited Liability Company villerida document numberL11000125904	were filed on November 4, 2011 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:			
ELST PROPER	ITIES, LLC			
The new name must be distinguishable and end with the words "Limit "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ed Liability Company," the designation "LLC" or the abbreviation			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here				

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

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Florida

Zip Code

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 = Ma MGRM = N	nager Nanaging Member		
Title	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Remove
D. If amen	ding any other information, ente	r change(s) here: (Attach additional she	ets, if necessary.)
Dated	November 4	2011	
	Signature of a	member of authorized representative of an	ornber
	Ryan M. Prager, Esq., At	torney in-Fact for Ryan M. Madso Typed or printed name of signee	n, Its: Member Mgr
		t Ahed of hunred ustue of 218uec	

Page 2 of 2

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