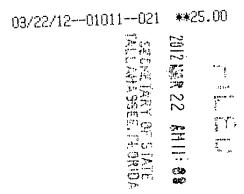
11000135322

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T. CLINE

MAR 2 3 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Property Guide LLC Name and 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:			
Wristen Pell			
Property Guick LLC			
9178 River Otter Dr.			
Fort Myck, P2 33912			
City/State and Zip Code Visten C Visten Dell, CON E-mail address: (to be used for future annual report notification)		2012 #4	* 1
For further information concerning this matter, please call:		報 2	sde tsd ^m Arr , s. Armari
Name of Person at (239) 292-9404 Area Code & Daytime Telephone Number	TOR TOR	2 新中:	
Enclosed is a check for the following amount:	ĢFI	60) 60)	
\$25.00 Filing Fee Solution \$30.00 Filing Fee & Sertificate of Status \$55.00 Filing Fee & Sertificate \$60.00 Filing Fee & Certificate C	of Status of 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

Property Guide				
(Name of the Limited Liability Compar (A Florida Limited L	w as it now appears on our records iability Company)	.)	_	
The Articles of Organization for this Limited Liability Company Florida document number <u>L11000135322</u> .	were filed on	and	d assign	ned
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:			
Property Guiding	LLC			
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designati	on "LLC"or	1~	reviation
Enter new principal offices address, if applicable:	<u>sume</u>	を	10 20	en :
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	- TAS	t ————————————————————————————————————
		<u> </u>	<u> </u>	
Enter new mailing address, if applicable:	3ame	ON DATE	co en	·
(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		ter the nar	ne of t	the new
Name of New Registered Agent:	3ame	.,		
New Registered Office Address:	Same Enter Florida street	address		
	. Florid			
	City , Florid		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

IGR = M IGRM =	lanager Managing Member	
<u>`itle</u>	<u>Name</u>	Address Type of Ac
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. II amei	nding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)
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Page 2 of 2

Filing Fee: \$25.00