L120000400e11

(Requestor's Name)					
(Address)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



800235971178

06/08/12--01005--022 **25.00

12 JUN -8 AHII: 38
SECRETARY OF STATE
FALLAHASSEE, FLORID,

D. BRUCE

JUN 1 1 2012

EXAMINER

COVER LETTER

TO:	Registration S Division of Co					
SUBJE	ECT:	REA	ALTA, LLC			
2024.		Name of Limi	ted Liability Company			
•						
The en	closed Articles of	Amendment and fee(s) are sub	emitted for filing.			
Please	return all corresp	ondence concerning this matter	to the following:			
			JULIAN G. JASSO			
			Name of Person			
		JL	JLIAN G. JASSO, LLC	,	,	
			Firm/Company			
		60 S.W.	13TH STREET, SUITE 2606	i		
Address						
	MIAMI, FL 33130					
			City/State and Zip Code			
			ANJASSO@GMAIL.COM to be used for future annual report notifica	tion)	EC. 2	•
For fur	ther information	concerning this matter, please c	·		JUN-8 JKETARY AHASSE	
		IAN G JASSO		84-4987	E.P.S	
	Name	of Person	Area Code & Daytime	Telephone Number	NH II: 38 OF STATE E. FLORIDA	O
Enclose	ed is a check for t	the following amount:				
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	osed)

MAILING ADDRESS:

1 . . .

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

	TA, LLC pany as it now appears on our records.) I Liability Company)			
(A Florida Limited	Leadility Company)			
The Articles of Organization for this Limited Liability Compan	ny were filed on MARCH 23, 2012 and as	ssigned		
Florida document number L12000040611				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	ability company here:			
JULIAN G. J	JASSO, LLC			
The new name must be distinguishable and end with the words "Lin" "L.L.C."	mited Liability Company," the designation "LLC" or the	abbreviation		
L.L.C.	· 🔑 🚗 🛶			
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	A STATE OF THE STA	150		
	SSE SE	the st		
	mo N	<u>।</u>		
Enter new mailing address, if applicable:	FLO	Ö		
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>			
B. If amending the registered agent and/or registered o	office address on our records, enter the name	of the new		
registered agent and/or the new registered office address he	ere:			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address , Florida			
	City Zip Coa	le		

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 = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
1., ,		·	Add Remove
· ———			Add Remove
D. If amend	ling any other information, er	nter change(s) here: (Attach additional sheets, if necessa	rry.)
			12 JUN -8 AN
Dated	JUNE 01	. <u>2012</u> . Jake	ANTIN 38
	Signature o	of a member or authorized representative of a member	
		JULIAN G JASSO	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00