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K.SALY EXAMINER AUG 22 2012

COVER LETTER

	ration Section on of Corporations
SUBJECT:	TMG Real Estate, LLC Name of Limited Liability Company
The enclosed A	rticles of Amendment and fee(s) are submitted for filing.
Please return all	correspondence concerning this matter to the following:
	John Dobson Name of Person
	Tean Market broup LLC Firm/Company
	20 F Contral Ave
	orlando Florida 3280 City/State and Zip Code
	John @ Team market broup. com E-mail address: (to be used for future annual report notification)
For further infor	rmation concerning this matter, please call:
10	Name of Person at (40) 496-7234 Area Code & Daytime Telephone Number
Enclosed is a ch	neck for the following amount:
\$25.00 Filin	g Fee \$\int_{\text{\$30.00 Filing Fee}} \& \int_{\text{\$55.00 Filing Fee}} \& \int_{\text{\$60.00 Filing Fee}} \\ \text{Certificate of Status} \\ \text{(additional copy is enclosed)} \\ \text{(additional copy is enclosed)} \end{additional copy is enclosed} \end{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

FILED.

	OF	7	Sec. 31 AM 11: 02
Name of the Limited I	Eal E Liability Compan Florida Limited Li	y as it now appears of ability Company)	LL CALLANDSEE, FLORIDA
The Articles of Organization for this Limited Lia	bility Company	were filed on 3	$\frac{28/2012}{2}$ and assigned
Florida document number L12000 L	12938	·	·
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liabi	lity company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ed Liability Company	"the designation "LLC" or the abbreviation
Enter new principal offices address, if applica	ble:	****	
(Principal office address MUST BE A STREET	"ADDRESS)		
		3.0.0	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		orland	Contral Ave
IMAILING AGGRESS MAT BE A POST OFFICE B	<u></u>	Urland	0, FI 32001
B. If amending the registered agent and/or registered agent and/or the new registered offi			records, enter the name of the new
Name of New Registered Agent:	Matt	her J.	Militzok
New Registered Office Address:	3230	S+; C Enter	Florida treet address
	Holly	wood	Florida 3302
Now Degistered Agent's Signature if changing De	agistored 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member						
<u>Title</u>	Name	Address	Type of Action			
	Oslando Ivast		☐ Add - St= 1850s → Remove 280			
M <u>GRM</u>	Team Maste	+ 600 p LC 342201d cepital	Add Remove			
			Add Remove			
			AddRemove			
			☐ Add ☐ Remove			
			AddRemove			
D. If amend	ding any other information	on, enter change(s) here: (Attach additional sheets,	if necessary.)			
_						
Dated	AUGUST 15	, 201)				
	Signa	Typed or printed name of signee	er			

Page 2 of 2

Filing Fee: \$25.00