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J. SAULSBERRY **EXAMINER**

MAY 29 2012

COVER LETTER

TO: Registration Sec Division of Corp		•				
SUBJECT: For S	Cale South Ta Name of Limi	mpa, LLC ited Liability Company				
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.				
Please return all correspon	dence concerning this matter	to the following:				
	Maria	nne Cloutier Name of Person				
	For So	rle South Tamp Firm/Company				
1208 E. Kennedy Blvd. #321 Address						
Tampa FL 33602 City/State and Zip Code Marianne Cloutier. Real Estate @gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Marianne Cloutier at (813) 310-6155						
Marianne Cloutier Real Estate @gmail.com						
	E-mail address: (to be used for future annual report notification	on) A SECOND			
For further information co	ncerning this matter, please of	eall:				
<u>Marianne</u>	Cloutier	at (813) 310 - 6 Area Code & Daytime Te	155 NAV 25 NAV 2			
Enclosed is a check for the		·	155 AH 8: 52 ARY OF STATE ASSEE: FLORIDA			
	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Registra Division P.O. Box	NG ADDRESS: tion Section of Corporations c 6327 see, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

For Sale South 7 (Name of the Limited Liability Compa (A Florida Limited L	ampa, LLC	cords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1200053092</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liah		
Marianne Cloutie The new name must be distinguishable and end with the words "Limit" L.L.C."	ted Liability Company," the des	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	Same	
(Principal office address MUST BE A STREET ADDRESS)		A ST.
		AR H
Enter new mailing address, if applicable:	same	25 LARY COASSEE
(Mailing address MAY BE A POST OFFICE BOX)		TS di
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		is, enter the name of the new
Name of New Registered Agent:	same	
New Registered Office Address:	same	
	Enter Florida	street address
		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 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 **Type of Action** <u>Title</u> **Name** Address ☐ Add Remove Add Remove ☐ Add Remove Remove ∐Add Remove ∏Add . Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ignature of a member or authorized representative of a member Marianne Clouties
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00