Florida Department of State Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LFF DEVELOPMENT, PLLC

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6/28/2012

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COVER LETTER

TO: Registration So Division of Con			·
SUBJECT: LFF DE	VELOPMENT, PLLC		
		ted Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Barbara Dang		
		(Name of Person)	
	Legalzoom.com, Inc.		and the state of t
		(Firm/Company)	
	100 W. Broadway Su	ite 100	
		(Address)	
	Glendale, CA 91210		
		(City/State and Zip Code)	
For further information of	concerning this matter, please co	all:	
Barbara Dang		at (323) 962-8600	·
(Name	of Person)	(Area Code & Daytime 1	elephode Number)
Enclosed is a check for t	he following amount:		·
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (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

SECRETARY OF STATE DIVISION OF CORPURATIONS

12 JUN 28 AM 8: 01

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LFF DEVELOPMENT, PLLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on <u>L.12000076277</u> __ and assigned Florida document number 06/07/2012 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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)

(Enter Florida street address)

MGR = Manager

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:

	<u>Name</u>	Address	Type of Actio
			Add Remove
 -			Add Remove
			AddRemove
	-		Add Remove
			Add Remove
			Add Remove
	nding any other information, enter	r change(s) here: (Attach additional sheets, if necessarich this LLC is organized is:	γ.)
<u>A</u>		ich this LLC is organized is:	y.)
<u>A</u>	rticle III. The purpose for whi	ich this LLC is organized is:	γ)
<u>A</u> <u>R</u>	rticle III. The purpose for whi	ich this LLC is organized is:	y.)
<u>A</u>	rticle III. The purpose for whi	nnd other business purposes 20/2 member or authorized representative of a member Typed or printed name of signee	
<u>A</u> <u>R</u>	rticle III. The purpose for whiteal Estate Sales Associate a	20/2 member or authorized representative of a member	