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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JUL **2 4** 2012

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Engel & Volkers Belleair LLC Name of 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:
Kelly Kepler Name of Person
Belleair Real Estate, LLC
432 Cleveland Street, SuiteB
Clearwater, FL 33755  City/State and Zip Code
Kelly. Kepler @ engelvoe kers.com  E-mill address: (tdbe used for future annual report notification)
The second secon
For further information concerning this matter, please call:  Kelly Kepler  Area Code & Daytime Telephone Number  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability	Company as it now appears on similed Liability Company)	ear, LLC our records.)	
The Articles of Organization for this Limited Liability Co. Florida document number	ompany were filed on Tu		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit  Belleav Real Es  The new name must be distinguishable and end with the word  "L.L.C."	state, LLC	he designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRI	<u></u>		
Enter new mailing address, if applicable:		FILET FILET AHASSEL	> >
(Mailing address MAY BE A POST OFFICE BOX)		70 N	
		00	
B. If amending the registered agent and/or registered agent and/or the new registered office address		ecords, enter the name of the new	
Name of New Registered Agent:		<del></del>	
New Registered Office Address:	Enter Florida street address		
	. Florida		
<del></del> -	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:

	Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
		· · · · · · · · · · · · · · · · · · ·	Add
			Remove
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<del></del>			Add Remove
D. If amen	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	
			_
			<b>12</b> TALI
_			JUL:
			AFFROYER AND FILED UL 23 PM RETARY OF AHASSEE, F
			PH 2
Dated	July 20, , 20	12	PH 2: 00 OF STATE OF STATE
	Kolly	of les	<del>T.</del>
	Signature of a njember	or authorized representative of a member	<del></del>
	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00