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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: T& + Real Estate Investments LC 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:
tet Real Estate Investments LC
Firm/Company
7630 pissarro by Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
+ Ugba USIU at (917) 213 - 8561 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

v

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

	bility Company as it now appears o	n our records.)
(A Flo	bility Company as it now appears or ida Limited Liability Company)	,
The Articles of Organization for this Limited Liabil	ity Company were filed on	$\frac{5-12}{}$ and assigned
Florida document number L12000113	5838	
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	2012 C
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company, .	"the designation "LEC" or to abbreviation
Enter new principal offices address, if applicable	<u> </u>	
(Principal office address MUST BE A STREET A	DDRESS)	
		5
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u>~~~</u>	
B. If amending the registered agent and/or r registered agent and/or the new registered office	U	records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	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 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>	<u>Name</u>	Address	Type of Action
116 R	David D Dellmann	2285 1st st Fort Tyers \$133901	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Remove
			Remove
D. If amendin	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.	<i></i>
Dated \$/ 2/	112 110		
-		r authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00