# L12000/38651

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T. HAMPTON

## COVER LETTER

TO: Registration Secti V Division of Corpo			
SUBJECT: TAFT		AL ESTATE U ed Liability Company	<u>C</u>
The enclosed Articles of Ar	nendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
		Name of Person	
		VILLAS REAL ESTATE LLO	TE LLC  I notification)  Daytime Telephone Number  U\$60.00 Filing Fee, Certificate of Status &
		, FL 33180	
		Address	ity Company  filing.  lowing:  S REAL ESTATE LLC  2ND  33180  Address  te and Zip Code  for future annual report notification)  Area Code & Daytime Telephone Number  .00 Filing Fee & Certificate of Status & Certified Copy dditional copy is enclosed)  Certified Copy  Certified Copy
~		City/State and Zip Code	
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For further information con	cerning this matter, please ca	all:	
	··-	at ()	
Name of P	erson	Area Code & Daytime Te	slephone Number
Enclosed is a check for the	following amount:		
□ \$25,00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy

#### MAILING ADDRESS:

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Cliffon 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 our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_ \_1200013 Florida document number 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Enter Florida street 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.

City

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 Title Type of Action ANDREW 14CKSON 2340 NE 192 LT 71471, FC 33180 Remove MADIA ESTEBAN ALDIA 2340 NE 1924 ST XADA 114M1, FL 33180 Remove Remove :Remove Remove

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ted	12/3/2012
	Signature of a member or authorized representative of a member  EJTESAN ALDA  Typed or printed name of signee

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Filing Fee: \$25.00

TO DEC 11 AM II: 59