L13000000920

. (Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
, , ,				
(Document Number)				
Certified Copies Certificates of Status	_			
Special Instructions to Filing Officer:	ļ			
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N. Culligan MAR 2 0 20131

COVER LETTER

TO: Registration Section
Division of Corporations

Bernard Packo PA

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:

Bernard Packo

Name of Person

Firm/Company

5289 Cedar Road

Address

St. Augustine, FL 32080

City/State and Zip Code

Berniepacko@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robin Packo

904 342-2733

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

□\$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)

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



March 13, 2013

BERNARDO PACKO 5289 CEDAR ROAD ST. AUGUSTINE, FL 32082

SUBJECT: PACKO'S REALTY LLC

Ref. Number: L13000000920

We have received your document for PACKO'S REALTY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Professional Limited Liability Company must contain PL, PLLC or Professional Limited Liability Company.

A brief description of the entity's nature of business must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

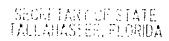
If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 913A00005880

2013 MAR 20 AM 10: 43

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Packo's Reality		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.)	
(A. F. A. F. B. F.	only Conjuny	
The Articles of Organization for this Limited Liability Company v	vere filed on 1/3/2013	and assigned
Florida document number L1300000920		
This amendment is submitted to amend the following:		
•		
A. If amending name, enter the new name of the limited liabil	ity company here:	
Bernard Packo P		
Bernard Packo PA FLL () The new name must be distinguishable and end with the words "Limite" L.L.C."	d Liability Company," the designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		n: f ::::::::::::::::::::::::::::::::::
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered officegistered agent and/or the new registered office address here:		name of the new
registered agent and/or the new registered office address nere-		
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:		
	Enter Florida street addres	S
	, Florida	Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agant and agre	a to got in this converte. I fourther assure	to amobiant
the provisions of all statutes relative to the proper and comple		
accept the obligations of my position as registered agent as p		

If Changing Registered Agent, Signature of New Registered Agent

heing 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 = V	lanaging Member		
Title	Name	Address	Type of Action
			Add
			Romove
- 1	,		Remove
		no 10 10 10 10 10 10 10 10 10 10 10 10 10	_
			Adu
			Kemove
			Add
			Remove
			Add
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			Add
			Remove

. If amending a	any other information, enter change(s) here: (Auach additional sheets, if necessary,)
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	Kelin Hed
	Signature of a member or authorized representative of a member
	ROBIN PORKE
	KOKIN PARKO. Typed or printed name of signed

Page 3 of 3

Filing Fee: \$25.00

FILED

2013 MAR 20 MI ID: 43

SLOBE TAKE THE DRIDE