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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

# Remove manager member

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:

Wayne Gebhardt

Name of Person

Homesaver Real Estate, LLC

Firm/Company

936 SW All American Blvd

Address

Palm City

City/State and Zip Code

waynegeb@aol.com

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

For further information concerning this matter, please call:

wayne Gebhardt

Name of Person

<sub>.../</sub>602<sub>\</sub>793-5898

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)

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

# Homesaver Real Estate, LLC

(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 january 0	9,2013 and assigned
Florida document number L13000004633		THE SECOND
	•	製作品
This amendment is submitted to amend the following:		
A 76 31		
A. If amending name, enter the new name of the lin	mited liability company here:	i i
	777	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi	istered office address on our reco	ords, <u>enter the name of the nev</u>
registered agent and/or the new registered office ad	ldress here:	
	•	•
Name of New Registered Agent:		
New Registered Office Address:		,
	Enter Flori	da 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 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
MGR	Joel A Newman	936 SW All American BlvdAdd
	·	Palm City FI
		34990
MGR	Greg M Addeo	5310 SW Orchid Bay Dr Add
	,	Palm City FL Remove
-		34990
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gnature of a member or authorize	ed representative of a member
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Filing Fee: \$25.00