## L130000087442

(Requestor's Name)
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## **COVER LETTER**

то:		istration Sec sion of Cor						
CLID IE		номе equ	UITY SOLUTIONS LLC -) TO	O -) PINELLAS PROPERTY	BUYERS, LLC			
SUBJE	CI;	Name of Limited Liability Company						
The encl	losed	Anicles of A	Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn	all correspor	ndence concerning this matter	to the following:				
			LUIS A VALETTE					
				Name of Person				
			PINELLAS PROPERTY E	BUYERS, LLC				
				Firm/Company				
			2803 GULF TO BAY BLV	VD.				
				Address				
			CLEARWATER, FL 3375	9				
				City/State and Zip Code				
			LUIS_VALETTE@HOTM	AIL.COM to be used for future annual repo				
For furth	ner inf	ormation co	ncerning this matter, please ca	·	t notification)			
LUIS A	VAL	ET <b>TE</b>		786 518-89 at ( )	97			
		Name of	Person	Area Code D	aytime Telephone Number			
Enclosed	is a	check for the	e following amount:					
<b>=</b> \$25.0	00 Fil	ling 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Home Equity Solutions, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Lii	mited Liabil	ity Company)	
The Articles of Organization for this Limited Liability Com- Florida document number L13000087442	npany wer	e filed on 06/18/2013	and assigned.
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability	company here:	
Pinellas Property Buyers, LLC			
The new name must be distinguishable and contain the words "Limited	Liability C	ompany," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:	28	803 GULF TO BAY BLVD	
(Principal office address MUST BE A STREET ADDRESS)		LEARWATER, FL 33759	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		BO3 GULF TO BAY BLVD LEARWATER, FL 33759	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or register registered agent and/or the new registered office address		address on our records, enter t	he name of the nev
Name of New Registered Agent: VALETT	E, LUIS A	Λ.	
New Registered Office Address: 2803 GU	LF TO BA	Y BLVD	_
		Enter Florida street address	
· CLEARV	VATER	, Florida 337	59
<del></del>		City	Zip Code
Name Desistanted Agent's Signature if shanging Desistanted A	aont.		

## 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
N/A	N/A	N/A	
			☐ Remove
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n effec	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 date the date inserted in this block does not meet the applicable statutory filing requirement	ys after filing.) Pursuant to 605.0
cume	t's effective date on the Department of State's records.	its, this date will not be listed
reco	rd specifies a delayed effective date, but not an effective time, at 12	:01 a.m. on the earlier
The S	0th day after the record is filed.	
ted_		
	1. 1 1/1:44-	
	Signature of a member or authorized representative of a member	
	LUIS ARTURO VALETTE	minister en
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00