#### V

# L1300013698

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ALLAHASSEE, FLORID,

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**EXAMINER** 

## COVER LETTER

SUBJECT: Posh k	Peal EsTATE Group Name of Limite	of Floury, LLC ed Liability Company	
The enclosed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	VAlencia Bigo Posh Real Es	STATE Group Firm/Company	
	1001 N. Marik	Address Address	<u></u>
	TAMPA, FO	ORUDA 33602 City/State and Zip Code	2013
	VALENCIA BATSVI E-mail address: (to	OGMAIL, COM	ZIII3 OCT -
For further information c	oncerning this matter, please ca	<b>11</b> ;	on) SSEE
Valencia Big	GERS BATSON	at (615 ) 879-227	/ AM 8:
Nam <b>é d</b>	f Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check for the	ne following amount:		
\$25.00 Filing Fee	☐\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fce & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

#### MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

Pash Real ESTATE Grou	pof Floripa, UC	
(Name of the Limited Liability (A Florida I	Company as it now appears on our re Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C Florida document number <u>L1300013059</u>	Company were filed on 9,24.13	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wor"L.L.C."	rds "Limited Liability Company," the des	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
		ATTACE TO ATTACK
Enter new mailing address, if applicable:		SSS
(Mailing address MAY BE A POST OFFICE BOX)	·	
		Res :
B. If amending the registered agent and/or registered agent and/or the new registered office add		is, enter the name of the new
replace to agent and of the new registered office and	i car iicre.	
Name of New Registered Agent:		
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	
	Enter Florida	street address
		Flor <del>i</del> da
	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

Title	<u>Name</u>	Address T	vpe of Action
MGRH	Alan Bruce Thompson	1207 N. Franklin Street, Ste 107 TAMPA, FLORIDA 33602	Add
			Remove
	· · · · · · · · · · · · · · · · · · ·		Add
			Remove
		T <sub>av</sub> .	Add
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menuing any other init	ormation, enter change(s) here: (Attach additional sheets, if necessar
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Maria	in Buggers John
Maria	Signature of a member of authorized representative of a member
Maria	Signature of a thember of authorized representative of a member  Biggers Barson  Typed or printed name of signee

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Filing Fee: \$25.00

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