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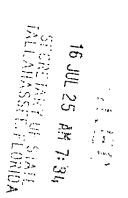
(Requestor's Name)				
Raymond Buttakield - 500 Whispering Ock Lone Apopko, FC 32712				
(Cit	y/State/Zip/Phon	ne #)		
PICK-UP	☐ WAIT	MAIL		
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Special Instructions to Filing Officer:				
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Office Use Only



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July 12, 2016

RAYMOND BUTTERFIELD 520 WHISPERING OAK LANE APOPKA, FL 32712

SUBJECT: PARKSIDE REALTY LLC

Ref. Number: L14000131102

We have received your document for PARKSIDE REALTY LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of 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.

Letter Number: 316A00013096

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida Property Valuations, LLC			
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited I	Liability Company	were filed on 8/21/2014	and assigned
Florida document number L14000131102			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
Parkside Realty International, LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		537 Oakhurst Street	
		Altamonte Springs, FL 32701	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		537 Oakhurst Street	
		Altamome Springs, FL 32701	
B. If amending the registered agent and registered agent and/or the new registered of			enter the name of the nev
Name of New Registered Agent:	Natalia Diaz		\$55 25 j
New Registered Office Address:	537 Oakhurst S	treet Enter Florida street address	79 3
	Altamonte Spri		da 327015 2
		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 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

Title	<u>Name</u>	Address	Type of Action
P	Natalia Diaz	537 Oakhurst Street	■ Add
		Altamonte Springs, FL 32701	☐ Remove
			Change
MGR Raymond Butterfield	Raymond Butterfield	255 Primera Blvd suite 160	
		Lake Mary, FL 32746	□ Remove
			Change
 .			
			Remove
			Change
			Add
		Remove	
			☐ Change
			Add
		□ Remove	
		-	☐ Change
			Add
			□ Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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E. Effective date, if other than the date of filing:	nt to 605,0207 (3)(b) t be listed as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the (b) The 90th day after the record is filed.	earlier of:
Dated	
Signature of a member or authorized representative of a member	
Raymond Butterfield Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00