

215 0000 27295

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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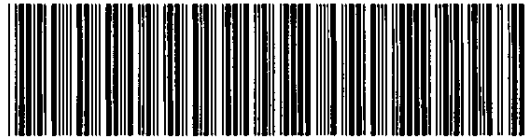
(Business Entity Name)

(Document Number)

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15 JUL 23 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 24 2015

J SHIVERS

COVER LETTER

ons

ESTATE HOLDINGS, LLC

Name of Limited Liability Company

ment and fee(s) are submitted for filing.

concerning this matter to the following:

JUL E. HILL

Name of Person

Firm/Company

5 LAKE ELEANOR RD.

Address

BUQUE, IA 52003

City/State and Zip Code

LHILL429@YAHOO.COM

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

g this matter, please call:

239

333-1031 X115

at ()

Area Code

Daytime Telephone Number

ng amount:

☐ \$00 Filing Fee &
Certificate of Status

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☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

ADDRESS:

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

Paul E. Hill
8235 Lake Eleanor Rd.
Dubuque, IA. 52003
Phone # 563-663-0722

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

PAUL HILL REAL ESTATE HOLDINGS, 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 02/06/2015 and assigned
Florida document number L15000023295

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8235 LAKE ELEANOR RD.

DUBUQUE, IA 52003

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8235 LAKE ELEANOR RD.

DUBUQUE, IA 52003

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

PAUL E. HILL

New Registered Office Address:

4019 SW 29 AVENUE

Enter Florida street address

CAPE CORAL

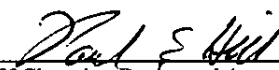
City

Florida

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	1031 REVERSE EXCHANGE CO	1520 ROYAL PALM SQ. BLVD. E	<input type="checkbox"/> Add
		FT. MYERS, FL 33919	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	PAUL E. HILL	8235 LAKE ELEANOR RD.	<input checked="" type="checkbox"/> Add
		DUBUQUE, IA 52003	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: 7/2/2015 (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated JULY 2, 2015

Theresa Monr

Signature of a member or authorized representative of a member

THERESA KNOWER

Typed or printed name of signee