L20000094722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

RA Signature

Office Use Only

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04/11/22--01081--021 **25.00

FILED
2022 MAY 26 PM 5:35
SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER

JUN - 7 2022

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: NICOLE WILBUR-REALTOR, PLLC
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:

NICOLE BENE BROWN
Name of Person

COLDWELL BANKER REALTY
Firm/Company

237 Arnold Ave.
Address

Longwood, FL. 32750
City/State and Zip Code

HOMES@NICOLEWILBURREALTOR.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICOLE B. BROWN at (321) 356-0555
Name of Person — 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)
- ☐ $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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
2022 MAY 26 PM 5:35
SECRETARY OF STATE
TALLAHASSEE, FL

NICOLE WILBUR-REALTOR, PLLC
(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 04/01/2020 and assigned Florida document number L20000094722.

This amendment is submitted to amend the following:

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

NICOLE WILBUR-BROWN, PLLC

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)

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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: NICOLE BENE BROWN

New Registered Office Address: _____
Enter Florida 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 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.

Nicole Wilbur-Brown
If Changing Registered Agent, Signature of New Registered Agent

Nicole Bene' Brown

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	Name	Address	Type of Action
MGR	Nicole Wilbur-Brown, PLLC	237 Arnold Ave., Longwood, FL. 32750	☒ Add
			☐ Remove
			☐ Change
MGR	Nicole Wilbur-Realtor, PLLC	237 Arnold Ave., Longwood, FL. 32750	☐ Add
			☒ Remove
			☐ Change
			☐ Add
			☐ 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.)*

My name is Nicole Bene Brown. I got married March 25th 2021. I would like to have my name changed to my married name. I was formerly Nicole Bene Wilbur. My business name was registered as Nicole Wilbur-Realtor, PLLC. I would actually like for it to be Nicole Wilbur-Brown, P.A. if at all possible. It only gave me the options above to enter Limited Liability Company, LLC, or L.L.C. I have been registered as a PLLC, but if I can change to P.A. that would be preferred. I have enclosed my marriage license for your records. I have tried calling multiple times to make sure I was filling this out properly, but can never get through. Thank you.

E. Effective date, if other than the date of filing: 03/04/2022 **(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 March 4th . 2022 .

Nicole Bene' Brown

Signature of a member or authorized representative of a member

Nicole Bene' Brown

Typed or printed name of signee

Filing Fee: $25.00

Grant Maloy, Clerk Of The Circuit Court & Comptroller Seminole County, FL
Inst #2021042880 Book:9890 Page:921; (1 PAGES) RCD: 4/1/2021 4:53:05 PM
REC FEE $0.00

Department of Health – Office of Vital Statistics

(STATE FILE NUMBER)

STATE OF FLORIDA
MARRIAGE RECORD

TYPE IN UPPER CASE
USE BLACK INK
This license not valid unless seal of Clerk, Circuit or County Court, appears thereon

210572
(APPLICATION NUMBER)

APPLICATION TO MARRY

1. NAME OF SPOUSE (First, Middle, Last)	1b. MAIDEN SURNAME (if applicable)	2. DATE OF BIRTH (Month, Day, Year)
DAVID WILLIAM BROWN		10/24/1964

3a. RESIDENCE - CITY, TOWN, OR LOCATION	3b. COUNTY	3c. STATE	4. BIRTHPLACE (State or Foreign Country)
237 ARNOLD AVE. LONGWOOD	SEMINOLE	FLORIDA 32750	DISTRICT OF

5. NAME OF SPOUSE (First, Middle, Last)	5b. MAIDEN SURNAME (if applicable)	6. DATE OF BIRTH (Month, Day, Year)
NICOLE BENE WILBUR		03/30/1963

7a. RESIDENCE - CITY, TOWN, OR LOCATION	7b. COUNTY	7c. STATE	8. BIRTHPLACE (State or Foreign Country)
237 ARNOLD AVE. LONGWOOD	SEMINOLE	FLORIDA 32750	FLORIDA

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9. SIGNATURE OF SPOUSE (Sign full name using black ink)	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
David Brown	03/10/2021
11. TITLE OF OFFICIAL	12. SIGNATURE OF OFFICIAL (Use black ink)
DEPUTY CLERK	Shayla Stevenson Jolly
13. SIGNATURE OF SPOUSE (Sign full name using black ink)	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
Nicole B. Wilbur	03/10/2021
15. TITLE OF OFFICIAL	16. SIGNATURE OF OFFICIAL (Use black ink)
DEPUTY CLERK	Shayla Stevenson Jolly

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THIS MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE	18. DATE LICENSE ISSUED	18a. DATE LICENSE EFFECTIVE	19. EXPIRATION DATE
SEMINOLE	03/10/2021	03/13/2021	05/09/2021

20a. SIGNATURE OF COURT CLERK OR JUDGE GRANT MALOY, CLERK OF THE CIRCUIT COURT & COMPTROLLER	20b. TITLE	20c. BY D.C.
Shayla Stevenson Jolly	DEPUTY CLERK	SSF

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED SPOUSES WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA

21. DATE OF MARRIAGE (Month, Day, Year)	22. CITY, TOWN, OR LOCATION OF MARRIAGE
03/25/2021	APOPKA, FL

23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink)	23c. ADDRESS (Of person performing ceremony)
Scott Harrell	32714 1226 BEAR OAK TRAIL ALTAMONTE SP. FL
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp)	24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)
SCOTT HARRELL - PASTOR	Patricia Harrell
	25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)
	Scott Harrell

SEAL

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED

CERTIFIED COPY - GRANT MALOY
CLERK OF THE CIRCUIT COURT
AND COMPTROLLER
SEMINOLE COUNTY, FLORIDA

BY _____ DEPUTY CLERK
Date 04/01/2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2022 MAY 26 AM 7:47
SECRETARY OF STATE
TALLAHASSEE, FL

May 9, 2022

NICOLE BENE BROWN
237 ARNOLD AVE.
LONGWOOD, FL 32750

SUBJECT: NICOLE WILBUR - REALTOR, PLLC
Ref. Number: L20000094722

We have received your document for NICOLE WILBUR - REALTOR, PLLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return 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) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 922A00010608