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í (Re	questor's Name)	
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D. SCOTT JAN 3 0 2017

COVER LETTER

Division of	Corporations			
Southwest SUBJECT:	est Orlando Realty LLC			
	Name of Lim	ited Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corre	espondence concerning this matter	to the following:		
	David Chio			
	Patrick Skiffingon			
		Name of Person		
	Keller Williams Classic			
		Firm/Company		
	6900 Turkey Lake Rd Suit	es 1-3		
		Address	 	三绝 二
	Orlando FL 32819		į	FILED IN 27 PH D: 47
	<u></u>	City/State and Zip Code		麵口匠
	broker@kwclassicgroup.com			Fig a B
	E-mail address: (to be used for future annual report notif	fication)	T42 P
For further information	on concerning this matter, please ca	all:		電点 5
Murray Coleman		352 400-1511		
Nar	ne of Person		e Telephone Number	_
Enclosed is a check for	or 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 Certificate of Certified Cop (additional copy	`Status & Py

MAILING ADDRESS: Registration Section

Registration Section

TO:

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

Southwest Orlando Realty LLC		
. (Name of the Limited Liability (A Florida	y Company as it now appears on our record Limited Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability Co Florida document number L03000005618	ompany were filed on $\frac{2/13/03}{}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	-روائه
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC	or the abbreviation L.L.C."
Enter new principal offices address, if applicable:		生活 生 九
(Principal office address MUST BE A STREET ADDRE	<u></u>	27 27 27 27 27 27 27 27 27 27 27 27 27 2
Enter new mailing address, if applicable:		93 R
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address.		s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	ss
	FI	orida
	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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Murray J Coleman	1200 Oakley Seaver Drive	Add
, , , , , , , , , , , , , , , , , , ,		Clermont FL 34711	□ Remove
			Change
			Add
			☐ Remove
			Change
			□ Add
			SD Remove
			G-Addro
			☐ Change
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tive date, if other than the	date of filing:		(optional)	
ffective date is listed, the date mus	t be specific and cannot be prior		than 90 days after filing.) Pursuant to 605.0
If the date inserted in this bloment's effective date on the Do	eck does not meet the applic	able statutory filing re	quirements, this date	will not be listed
cord specifies a delayed	effective date, but no	t an effective tim	e, at 12:01 a.m.	on the earlie
e 90th day after the rec	ord is filed.			
January 24th	2017			
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		orized Prosentative of a		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00