10400026040

(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:

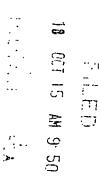
Office Use Only



400319386794

10/16/18--01013--004 **25.00

RECEIVED OCT 1 5 20:3



O STRANAONS OCT 20 2018

COVER LETTER

TO: Registration S Division of Co		.2		
SUBJECT:	Global Name of Lin	Realty B	rokers	LL
The enclosed Articles of	Amendment and fec(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
	Ke	M Karm Name of Person	an	
	PO.	Firm/Company $B \circ \times \qquad \qquad$	772	
	- Ort	City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code	32862 cfl.rr.c	om
For further information c	oncerning this matter, please c	and the same to the same difficult report from	HCALION)	
Hein	1 -	$\underbrace{ \text{at} (40) }_{\text{Area Code}} \underbrace{ 924}_{\text{Daytime}}$	-4402	_
Name o	f Person	Area Code / Daytim	e Telephone Number	
Enclosed is a check for the	ne 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 Fe Certificate of S Certified Copy (additional copy is	tatus &

MAILING ADDRESS:

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

(Name of the Limited Liability Company as it now appears on our reconstruction (A Florida Limited Liability Company)	kers LLC
The Articles of Organization for this Limited Liability Company were filed on	and assigned
Florida document number	
This amendment is submitted to amend the following:	STEET STEET
A. If amending name, enter the new name of the limited liability company here:	
	9
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: 14837 HON	EYCRISP LN
(Principal office address MUST BE A STREET ADDRESS) Orland	0 FL 32827
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) POBOX Orland	6217)2, 6,FL32862
B. If amending the registered agent and/or registered office address on our record registered agent and/or the new registered office address here:	ds, enter the name of the new
Name of New Registered Agent: Hein Karma	an
Name of New Registered Agent: New Registered Office Address: 1483 Horizon Cruso Enter Florida street ddre	C6
Orlando, F	lorida 32827
Jan Danistan J. A. and St.	, ,

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

Page 1 of 3

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>	Address	Type of Action
			☐ Remove
			Change
			□ ∧dd
			□ Remove
			☐ Change
		_ /	□ Add
			Remove Change
			<u>r</u> 哲Add > 5 ○
			□ Remove
			Change
	-		D Add
			Remove
			☐ Change
			☐ Remove

					
					_
		-	7-	-	
			-		
		_			
		-			
					
					
				•	<u> </u>
				· -	901
			<u> </u>		5 -
					<u> </u>
					<u>ب</u>
				: **	50.
		-			
ctive date, if other than the date of filing:			,		
effective date is listed, the date must be specific and cannot be pri	rior to date of f	iling or more than	(opti 90 days after	filina) i	Pursuant to 60:
e: If the date inserted in this block does not meet the appliment's effective date on the Department of State's record	dicable statut ds.	ory filing requir	ements, thi	s date w	ill not be list
ecord specifies a delayed effective date, but r ne 90th day after the record is filed.	not an effe	ctive time, a	t 12:01 a	a.m. o	n the earli
. 1	0				
d 10/04/ 201	8				
Signature of a member or au	thorized repro	contative of a	nhor		

Page 3 of 3

Filing Fee: \$25.00