

L06000038772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

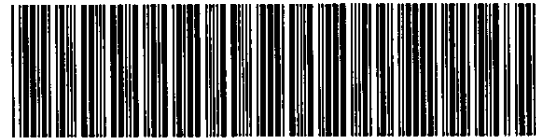
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2017 JAN 13 P 4: 58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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JAN 17 2017



Richard W. Wilkinson

## Wilkinson Development Corp.

106 Commerce Street, Ste. 110  
Lake Mary, FL 32746  
Phone (407) 333-8006  
Fax (407) 333-8033  
Richard@WilkinsonDevelopment.com

January 11, 2017

Via Federal Express

Florida Department of State  
Registration Section  
Division of Corporations  
Clifton Building  
2662 Executive Center Circle  
Tallahassee FL 32301

RE: Florida Document No L06000038772  
Request for Articles of Amendment to Articles of Organization  
Of Wilkinson Eagles Nest LLC

Dear Sir or Madam:

Please find enclosed completed Form s.605.0202 requesting an Amendment of the above referenced limited liability company to effect a change of name from **Wilkinson Eagles Nest LLC** to the requested revision of **Wilkinson Realty Holdings LLC**.

In addition, we are adding Linda J Heyse as an authorized member of the entity, however, Richard W Wilkinson will remain as the Managing Member and Registered Agent.

Enclosed as well is our check in the amount of \$60.00 to cover the cost of the filing fee, receipt of a Certified Copy and Certificate of Status.

Thank you in advance for your attention to this request and please do not hesitate to contact me should you have any questions.

Sincerely,

WILKINSON EAGLES NEST LLC

BY: 

Richard W Wilkinson, Managing Member

Enclosures: as stated



## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: WILKINSON EAGLES NEST LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LINDA J HEYSE

Name of Person

c/o WILKINSON DEVELOPMENT CORP

Firm/Company

106 COMMERCE ST, STE 110

Address

LAKE MARY FL 32746

City/State and Zip Code

[linda@wilkinsondevelopment.com](mailto:linda@wilkinsondevelopment.com)

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

For further information concerning this matter, please call:

LINDA J HEYSE

Name of Person

at ( 407 ) 333-8006

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|--|--|---|

**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**

WILKINSON EAGLES NEST 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 4/13/2006 and assigned  
Florida document number L06000038772.

This amendment is submitted to amend the following:

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

WILKINSON REALTY HOLDINGS LLC

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: \_\_\_\_\_

n/a

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: \_\_\_\_\_

n/a

(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: \_\_\_\_\_

n/a

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.*

If Changing Registered Agent, Signature of New Registered Agent \_\_\_\_\_

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CLERK OF DISTRICT COURT  
TAMPA FLORIDA

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>
AMBR	LINDA J HEYSE	1476 SHADWELL CIRCLE HEATHROW FL 32746	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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.

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

Typed or printed name of signee

**Filing Fee: \$25.00**

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TREASURY OF STATE  
TAMMSESS. FLORIDA

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