# L060000 61651

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	ne)
(De	ocument Number)	
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# **COVER LETTER**

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* CUDIFOT.	MAXIM L	LC		
SUBJECT:	·	Name of Lim	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	endence concerning this matter	to the following:	
		Bent Danholm		
			Name of Person	
		MAXIM LLC	Name of Person  C Firm/Company  Pkwy  Address  FL 33907  City/State and Zip Code  realtors.com  mail address: (to be used for future annual report notification)  atter, please call:  at (407	
			Firm/Company	<del></del>
		7370 College Pkwy		
			Address	<del></del>
		Fort Myers, FL 33907		
		<del></del>	City/State and Zip Code	
		bent@maximrealtors.com		
For further i	information co	e-mail address: (	·	ication)
Bent Danho	olm			
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e following amount:		
र्छ \$25.00 ।	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy

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

MAXIM LLC			
( <u>Name of the Lim</u>	ited Liability Company as it no (A Florida Limited Liability C	ow appears on our records.) company)	
The Articles of Organization for this Limited I	Liability Company were file	ed on	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability com	npany here:	
The new name must be distinguishable and contain the	words "Limited Liability Compa	any," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		<sup>(1)</sup>
Principal office address MUST BE A STRE	ET ADDRESS)		TE ISEC
Enter new mailing address, if applicable:			LED EY OF S CORPOR
Mailing address MAY BE A POST OFFICE	<u></u>		Z AND
			<b>56</b> ₹
egistered agent and/or the new registered o	office address here:	lress on our records, <u>en</u>	ter the name of the new
Name of New Registered Agent:	Dent Dannoini		
New Registered Office Address:	Limited Liability Company were filed on 06/16/2006 and assigned  and the following:  we name of the limited liability company here:  contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC"  and assigned  by name of the limited Liability Company." the designation "LLC" or the abbreviation "LLC"  and assigned  by name of the limited Liability Company." the designation "LLC" or the abbreviation "LLC"  by name of the limited Liability Company." the designation "LLC" or the abbreviation "LLC."  contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."  by 15/15/15/15/15/15/15/15/15/15/15/15/15/1		
	Gotha		2.472.4
	City	, Florida	Zip Code
	±.,y		

### 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:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			☐ Change
			Add
			Remove
			□ Change
			Add
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					26	SHOLLY
			<del></del>			(7
Effective date, if other than the	05/ e date of filing:	11/18		(optional)		
Effective date, if other than the If an effective date is listed, the date mu Note: If the date inserted in this b	st be specific and cannot lock does not meet th	t be prior to date e applicable s	of filing or more th	nan 90 days after filing.) uirements, this date v	Pursuant to 605.0	.0207 ed as
document's effective date on the I						
ne record specifies a delaye The 90th day after the rec		but not an	effective time	, at 12:01 a.m. c	on the earlie	er o
May 11	201	<b>(</b> )				
Dated May 11	. 201	· · · ·	1 m			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00