

**L07 00000 8088**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

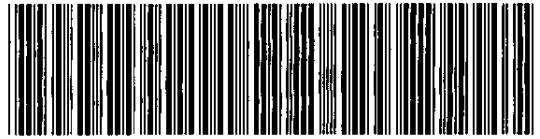
(Document Number)

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09 MAY - 5 PM 3:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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J. BRYAN

APR 21 2009

J. BRYAN

MAY - 6 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 21, 2009

DR. LILIA BELKOVA  
REALTY SERVICES LLC  
PO BOX 294  
MORRISTON, FL 32668

SUBJECT: REALTY SERVICES LLC  
Ref. Number: L07000008088

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for REALTY SERVICES LLC 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 document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

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) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 709A00013376

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: REALTY SERVICES LLC

(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:

LILIA BELKOVA

(Name of Person)

(Firm/Company)

PO BOX 294

(Address)

MORRISTON, FL 32668

(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

LILIA BELKOVA

(Name of Person)

at ( 352 ) 342 48 02

(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)

*already  
received*

### 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**

REALTY SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/18/2006 and assigned  
Florida document number L07000008088.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

3351 SE 186 AVE

**(Principal office address MUST BE A STREET ADDRESS)**

MORRISTON, FL 32668

Enter new mailing address, if applicable:

PO BOX 294, MORRISTON, FL 32668

**(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:

LILIA BELKOVA

New Registered Office Address:

3351 SE 186 AVE

*(Enter Florida street address)*

MORRISTON

*(City)*

. Florida 32668

*(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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

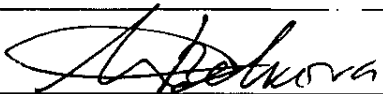
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	LILIA	BELKOVA	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	KARL	STEHLIN	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated



Signature of a member or authorized representative of a member

DR. LILIA BELKOVA

Typed or printed name of signee

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TALLAHASSEE, FLORIDA