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(Re	questor's Name)	
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(Do	ocument Number)	
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19 JUL - 5 PM 1: 855

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COVER LETTER

Division of Corporations
SUBJECT: Ocala Town and Country Real Estate 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:
Brenda Wallenstein Name of Person
Ocala Town and Country Real Estate LLC Firm/Company
8679 SW 83 LOOP Address
Ocala, FL 34481 City/State and Zip Code Brenda Wallenstein Egmail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Brenda Wallenstein at 352, 239-1477 Name of Person at 352 Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigsquare \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigsquare \text{Certified Copy (additional copy is enclosed)}\$\$\$ Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:

TO:

Registration Section

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

18 JUL -6 PM 1: 1

Ocala Town and Country Real Estate LLC

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

The Articles of Organization for this Limited Liability Company were filed on 02 - 08 - 2007 and assigned Florida document number 407000015683.

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 contain the work				
Enter new principal offices address, if applicable of the application of the address MUST BE A STREET		8679 S Ocala,	W 83 L.	181
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo	<u>ON)</u>	8679 Ocala,	SN 83 1 FL 344	181
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered offic ce address here:	e address on ou	ir records, <u>enter</u>	the name of the nev
Name of New Registered Agent:				
New Registered Office Address:	8679	5W 83 Enter Florida		·
	Ocala		Florida	34481 Zip Code
		City	, FROMMA	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 = A	uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□ Remove
			Change
			Add
			☐ Remove
			Change
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effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or m e: If the date inserted in this block does not meet the applicable statutory filin ument's effective date on the Department of State's records.	(optional) ore than 90 days after filing.) Pursuant to 605 g requirements, this date will not be liste	.02 ed :
record specifies a delayed effective date, but not an effective t he 90th day after the record is filed.	ime, at 12:01 a.m. on the earlie	er
ed June 27 2018		
Brench Walland. Signature of a member or authorized representative		

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Typed or printed name of signee

Filing Fee: \$25.00