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TO: Registration Section Division of Corporations

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SUBJECT:		t Realtor Broker LLC	
	Name of Limi	ited Liability Company	Og DEC '1 HT
•			
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	ر: به
Please return all corres	pondence concerning this matter	to the following:	
	<u></u>	Renee Kozlowski	
		Name of Person	
Emerald Coast Realtor Broker			
		Firm/Company	
	:	316 S. Carolyn Drive	
		Address	·
		Lake City, MI 49651	
		City/State and Zip Code	
	k	im.stew@yahoo.com to be used for future annual report notific	
			callon)
For further information	concerning this matter, please of		
Re	enee Kozlowski	at (393-3988
Name	e of Person	Area Code & Daytime	e 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	560.00 Filing Fee, Certificate of Status &
	Continence of Buildo	(additional copy is enclosed)) Certified Copy
			(additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations		STREET/COURI	
		Registration Section Division of Corpora	
P.O.	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Cer	nter Circle
i anc	araansi menengi ta suri un'unon' ta T	Tatlahassee, FL 32	

TC ARTICLES OF O O	RGANIZATI		090EC 140845 CC
Emerald Coast Re	altor Broker I		
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L			"IQ. "IQ"
The Articles of Organization for this Limited Liability Company	were filed on	04/20/2007	and assigned
Florida document number L07000042280			
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited liab</u> i	ility company here	:	
The new name must be distinguishable and end with the words "Limit	ted Liability Compar	iy," the designation	"LLC" or the abbreviation
"L.L.C."			
Enter new principal offices address, if applicable:			
		•	
Enter new principal offices address, if applicable:		•	
Enter new principal offices address, if applicable:		,	
Enter new principal offices address, if applicable: <u>(Principal office address MUST BE A STREET ADDRESS)</u>		•	
Enter new principal offices address, if applicable: <u>(Principal office address MUST BE A STREET ADDRESS)</u> Enter new mailing address, if applicable:			
Enter new principal offices address, if applicable: <u>(Principal office address MUST BE A STREET ADDRESS)</u> Enter new mailing address, if applicable:	fice address on o		
Enter new principal offices address, if applicable: <u>(Principal office address MUST BE A STREET ADDRESS)</u> Enter new mailing address, if applicable: <u>(Mailing address MAY BE A POST OFFICE BOX)</u> B. If amending the registered agent and/or registered of	fice address on o		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on o	ur records, <u>ente</u>	r the name of the new
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:	fice address on o		r the name of the new
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:	fice address on o	ur records, <u>ente</u>	<u>r the name of the new</u> ddress

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, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

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<u>Title</u>	Name	Address	Type of Action	
MGRM	Michael Hubschman	825 N. Grandview Ave Davtona Beach, FL 32118	Add Remove	
MGRM	Renee Kozlowski	1728 Turkey Oak Drive Navarre, FL 32566	Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
D. If amendi	ng any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	Add Remove	
		•		
Dated	P. M	09 or authorized representative of a member		
	R	enee Kozlowski		
Typed or printed name of signee				
Page 2 of 2				
	F	iling Fee: \$25.00		