

LD7000043830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

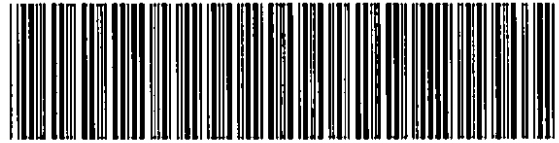
(Business Entity Name)

(Document Number)

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18 SEP 17 PM 2:40  
TALLAHASSEE, FLORIDA

SECTIONS  
SEP 20 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Sunstate Home Investment Realty  
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:

PATTI MOTT  
Name of Person  
Sunstate Home Investment Realty  
Firm/Company DBA Century 21 Sunstate  
125 W PINE AVE  
Address  
LONGWOOD, FL 32750  
City/State and Zip Code  
Sunstateacct@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patti Mott at ( 407 ) 268-4447  
Name of Person 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)

**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

Sunstate Home Investment Realty (DBA Century 21  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company) Sunstate,

Page 1 of 3

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>
MGR	Richard Feacher	125 W PINE AVE	<input type="checkbox"/> Add
		LONGWOOD, FL 32750	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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FILED  
JUN 17 2018  
11:20 AM  
CLERK

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

E. Effective date, if other than the date of filing: 9/11/18 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

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

Dated 9/11. 2018

Signature of a member or authorized representative of a member

WADE HASTINGS  
Typed or printed name of signer

Typed or printed name of signee