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COVER LETTER

то:	Registration Sec Division of Corp					
		T LAND SERVICES, LLC				
SORTE	CT:Name of Limited Liability Company					
The enc	losed Articles of A	mendment and fee(s) are sub-	nitted for filing.			
Please r	eturn all correspon	dence concerning this matter (to the following:			
		KRISTEN M. GORMAN				
		45-7-	Name of Person			
		SOUTHEAST LAND SER	EVICES, LLC			
		Firm/Company				
		22234 EAST STATE ROAD 64				
			Address			
		BRADENTON, FLORIDA 34212				
		E-mail address: ()	to be used for future annual report notific	cation)		
For furt	her information co	ncerning this matter, please ca	alt:			
KRIST	EN M. GORMAN		at () 908-0021 Area Code Daytime			
_	Name of	Person	Area Code Daytime	Telephone Number		
Enclose	ed is a check for the	e following amount:				
□ \$25	5.00 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:

e contract

TO:

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

SOUTHEAST LAND SERVICES.					
(Name of the Limi	led Liability Compa (A Florida Limited	iny as it now appears on o Liability Company)	ur records.)		
The Articles of Organization for this Limited L Florida document number $\frac{\text{L}07000049375}{\text{L}07000049375}$	2007	and assigned			
his amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	oility company here:			
he new name must be distinguishable and contain the v	vords "Limited Liabi			obreviation "	11C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		22234 EAST STATE	ROAD 64		
		BRADENTON, FLO	RIDA 34212	. 2) 1
				2019	<u>:</u> }
			!		("1")
nter new mailing address, if applicable:		:	24	****	
Mailing address MAY BE A POST OFFICE	ROX)			707	
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				·-· <u></u>	
 If amending the registered agent and egistered agent and/or the new registered or 	• • •		records, enter	the name	e of the i
Name of New Registered Agent:					
New Registered Office Address:	22234 EAST S	STATE ROAD 64			
		Enter Florida str	eet address		
	BRADENTON	į.	Florida _ ³⁴	1212	
		City		Zip Cod	c

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CHRISTOPHER W. GORMAN	22234 EAST STATE ROAD 64, BRADENTON, FLORIDA 34212	Add
			☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			Remove
			Change
			
			□ Remove
			Change
			□ Remove
			☐ Change
			D Add
			Remove
			□ Change

	and CHRISTOPHER W. GORMAN.
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an effe ote:	ve date, if other than the date of filing:
e rec The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ated _	September 16 2019.
	Signature of a member or authorized representative of a member
	Kristen Forman Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00