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DO JUL 21 PH 1:59
SECRETARY OF STATE
SECRETARY OF LORIDA

M. THOMAS

JUL 2 2 2008

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp			% :
suвјест: My Tam	pa Bay Realtor, LLO (Name of Limi	ted Liability Company)	—
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Sonny L Hotchkiss	,	D8 JUL 21 PH 1:59 SECULIARISE FLORID FILLEL
		(Name of Person)	
	My Tampa Bay Realtor, t	LC	
		(Firm/Company)	PH PH
	1417 Fairfield Dr		FLOST 1:5
		(Address)	AND SO
	Clearwater, FL 33764		•
	· · · · · · · · · · · · · · · · · · ·	(City/State and Zip Code)	
For further information co	oncerning this matter, please ca	all:	
Sonny L Hotchkiss		at (727) 612-7200	
(Name o	f Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for th	e 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



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

My Tampa Bay Realtor, LLC		
(Name of the Limited Liability C (A Florida Lin	Company as it now appears nited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability Cor	007 and assigned	
Florida document number L07000090465		
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limite	ed liability company here	DB JUL 21 PT
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1417 Fairfield Dr	
(Principal office address MUST BE A STREET ADDRE	Clearwater, FL 3	3764
Enter new mailing address, if applicable:	1417 Fairfield Dr	
(Mailing address MAY BE A POST OFFICE BOX)	Clearwater, FL 3	3764
B. If amending the registered agent and/or registered agent and/or the new registered office address		r records, enter the name of the new
Name of New Registered Agent: Sonny L	FIOLETRISS	
New Registered Office Address: 1417 Fa	airfield Dr	
	(Ent	er Florida street address)
Clearwa		, Florida 33764
	(City)	(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)

St

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 Title. <u>Name</u> **Type of Action Address MGRM** Jameson B Harmsworth Add 4815 Bay Heron Place Unit 616 Tampa, FL 33616 Reniove ☐ Add Remove **↑** Add Remove ☐ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

		_
		-
ULY 7th	. 2008	
. 4	latet	
	Signature of a member or authorized representative of a member	
	Sonny L Hotchkiss	
•	Typed or printed name of signee	

Dated _

Page 2 of 2

Filing Fee: \$25.00

81