

LD0000020846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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NOV - 9 2010

EXAMINER

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11/08/10--01019--024 **25.00

SECRETARY OF STATE
TREASURY DEPARTMENT
TALLAHASSEE, FLORIDA

10 NOV - 8 PM 4:59

FILED



Date: October 25, 2010

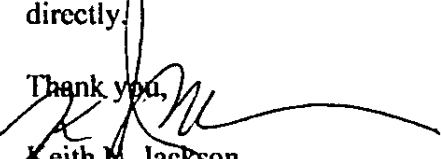
To: Department of Business and Professional Regulations
1940 North Monroe Street
Tallahassee, FL 32399

Re: Resignation of Qualifying Broker

My name is Keith Neal Jackson (BK# 3108032); I have served as the The Acropolis 559, LLC (EIN# 34-2327818) dba Jackson Realty & Appraisal Services real estate broker for over 3 years. As of today, I am resigning my position as qualifying broker and will be leaving the company to pursue other interests in the real estate industry. Paul Jackson (BK# 136683) will remain as the new qualifying broker and will serve the company going forward.

I was instructed by a member of the DBPR Reference# 2-64807639 and Reference# 2-64808756 (10/25/2010) on the proper procedure for resignation as a qualifying broker from Jackson Realty and installation of myself as a broker associate with my new company. Attached please find the necessary DBPR paperwork I am submitting for change. If there is any additional information you require please get in touch with me directly.

Thank you,


Keith M. Jackson
Licensed Real Estate Broker
Certified Property Management Specialist
Jackson Realty & Appraisal Services
Contact 321.662.0422
Facsimile 407.386.3198

CC: Florida Department of State – Division of Corporations

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

THE ACROPOLIS 559, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 2-27-2008 and assigned
Florida document number LC800 0020 846.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

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

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NOV - 8 PM 4:59
CLERK OF DISTRICT COURT
STATE OF FLORIDA

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	KEITH JACKSON	7775 RIFFLE LANE DELAND, FL 32818	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated OCTOBER 25, 2010



Signature of a member or authorized representative of a member

KEITH JACKSON

Typed or printed name of signee