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SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

Registration Section TO: **Division of Corporations**

EACTORD REAL ESTATE SERVICES USC.
(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:

PEACTORO REAL ESTATE SERVICES LLC
(Firm/Company)

2895-A COLLINS AVE (Address)

HIAHI BEACH FL 33140
(City/State and Zin Code)

For further information concerning this matter, please call:

DANIEUE HAAR at (786 3746438

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

☐\$30.00 Filing Foc & Certificate of Status

☐\$55.00 Filling Fee & Certified Copy

(additional copy is enclosed)

CIS60.00 Filling Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

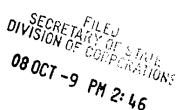
MAILING ADDRESS:

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



REALTORD REAL ESTATE SERVICES 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		and assigned
Florida document number <u>LO8000049280</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limit"L.L.C."	ted Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	2895-A COCL	INS AVE.
(Principal office address MUST BE A STREET ADDRESS)	2895-A COCC MIAHI BEA	CH FL 33 140
Enter new mailing address, if applicable:	2895-A COL	LINS AVE. ACH FLBB140
(Mailing address MAY BE A POST OFFICE BOX)	MIAHI BE	ACH FL33140
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	-	enter the name of the new
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)

or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Type of Action** <u>Address</u> <u>Title</u> **Name** MGR Add Remove r¶ Add Remove Add
 Add
 Add
 Add
 Add Remove ☐ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) BERVICES Typed or printed name of signee

" If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

Page 2 of 2

Filing Fee: \$25.00