L08000066726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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16 MAR 10 PM 4:06

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Y SULKER

FLORIDA DEPARTMENT OF STATE
Division of Corporations

2016 MAR 30 AM 11:09

March 10, 2016

MATHEW REDMER
532 ABBOTSFORD CT
SAINT JOHNS, FL 32259 US

SUBJECT: FLORIDANEWHOMES.COM, LLC
Ref. Number: L08000066726

We have received your document for FLORIDANEWHOMES.COM, LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 716A00004972

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: FloridaNewHomes.com, LLC
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:

Matthew Redmer
Name of Person

Florida New Homes.com, LLC
Firm/Company

532 Abbotsford Ct.
Address

Saint Johns, FL 32259
City/State and Zip Code

mattredmer@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Redmer at (904) 755-0766
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

_____

(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 7/10/2008 and assigned Florida document number L08000066726

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

We Give Realty, LLC

The new name must be distinguishable and contain 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 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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager
AMBR = Authorized Member

Title	**Name**	**Address**	**Type of Action**
______	______________________	________________________________	☐ Add
		________________________________	☐ Remove
		________________________________	☐ Change
______	______________________	________________________________	☐ Add
		________________________________	☐ Remove
		________________________________	☐ Change
______	______________________	________________________________	☐ Add
		________________________________	☐ Remove
		________________________________	☐ Change
______	______________________	________________________________	☐ Add
		________________________________	☐ Remove
		________________________________	☐ Change
______	______________________	________________________________	☐ Add
		________________________________	☐ Remove
		________________________________	☐ Change
______	______________________	________________________________	☐ Add
		________________________________	☐ Remove
		________________________________	☐ Change

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

16 MAR 30 PM 4:06

E. Effective date, if other than the date of filing: _____ (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 March 28, 2016.

Signature of a member or authorized representative of a member

Matthew Redmer

Typed or printed name of signee

Filing Fee: $25.00