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TO: Registration Se Division of Cor		e • • •	
	ENT LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ZAHRAH T MADISO	ON	
	•	Name of Person	
	MADISON REALTY	TEAM, LLC	
		Firm/Company	
	248 FAIRFIELD DR	IVE	
	·	Address	
	SANFORD, FL 3277	71	
		City/State and Zip Code	
	MADISONREALTYT	_	
	E-mail address: (to be used for future annual report notific	cation)
For further information c	oncerning this matter, please c	all:	
ZAHRAH T MADIS	SON	407 731-4026	
Name o	f Person	at ()	Telephone Number
Enclosed is a check for the	ne 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

REZILIENT LLC			
(Name of the Limi	(A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited L Florida document number <u>L08000070277</u>	iability Company	were filed on JULY 21 2008	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liabi	lity company here:	
MADISON REALTY TEAM, LLC			
The new name must be distinguishable and end with the	words "Limited Liab	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	248 FAIRFIELD DRIVE	
(Principal office address MUST BE A STREE	ET ADDRESS)	SANFORD, FL 32771	
Enter new mailing address, if applicable:		248 FAIRFIELD DRIVE	
(Mailing address MAY BE A POST OFFICE	BOX)	SANFORD, FL 32771	
B. If amending the registered agent and registered agent and/or the new registered o			enter the name of the nev
Name of New Registered Agent:	ZAHRAH T	MADISON	5 1
New Registered Office Address:	248 FAIRFI		7 7
		Enter Florida street address	
	SANFORD	, Flori	da 32771 🖹 [Y]
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		06

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR =	Manager	,
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ZAHRAH T MADISON	248 FAIRIFIELD DRIVE	
		SANFORD, FL 32771	Remove
AMBR	JEFFERY MADISON	248 FAIRFIELD DRIVE	
		SANFORD, FL 32771	□ Remove
			□ Remove
			Add S S Emove
			R Z A M
			Remove
			Add
			□ Remove

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Page 3 of 3

Filing Fee: \$25.00

