## L08000096040

(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL			
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(Bu	siness Entity Nar	ne)			
(Do	cument Number)				
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2011 NOV -9 PK 1:36 SECRETARY OF STATE TALL AHASSEE, FLORIDA

C. LEWIS

NOV 1 0 2011

EXAMINER

## **COVER LETTER**

TO:	Registration Division of	1 Section Corporations	rys Mr. Mg.	1.			
	<b>♣</b> 4.8						
SUBJECT: Teresa Turner Realty Services, LLC							
		Name of Li	imited Liability Company				
The en	closed Articles	of Amendment and fee(s) are	submitted for filing.				
Please	return all corre	espondence concerning this mat	tter to the following:				
			Teresa Turner				
	Name of Person						
	Teresa Turner, LLC						
	Firm/Company						
	1520 Killearn Center Boulevard, Suite 100						
	Address						
	Tallahassee, FL 32309						
	City/State and Zip Code						
	TeresaTurner@kw.com  E-mail address: (to be used for future annual report notification)						
For fu	ther information	on concerning this matter, pleas	e call:				
		Teresa Turner	at (_850 )	933-7899			
	Nan	ne of Person	Area Code &	Daytime Telephone Nun	nber		
Enclos	ed is a check for	or the following amount:					
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	Certif nclosed) Certif	Filing Fee, ficate of Status & fied Copy tional copy is enclosed)		

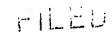
**MAILING ADDRESS:** 

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



2811 NOV -9 PM 1: 36

		20111101		
Teresa Turner Rea	Ity Services, LLC	eres CIADVINE STATE		
(Name of the Limited Liability Compa	ny as it now appears on ou	IF records AHASSEF, FLORIDA		
Teresa Turner Rea (Name of the Limited Liability Compa (A Florida Limited L	Liability Company)	INCENTIAGOLETY		
The Articles of Organization for this Limited Liability Company	were filed on10	10/2008 and assigned		
Florida document number L08000096040 .				
This amendment is submitted to amend the following:				
A If amounting name automaths now name of the limited lish	ilita aamuann kana.			
A. If amending name, enter the new name of the limited liab	mty company nere:			
Teresa Turi	ner, LLC			
The new name must be distinguishable and end with the words "Limi" L.L.C."	ted Liability Company," the	e designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	1520 Killearn Cent	er Boulevard		
(Principal office address MUST BE A STREET ADDRESS)	Suite 100			
	Tallahassee, FL 3	2300		
	Taliariassee, I L S	2309		
Enter new mailing address, if applicable:	1520 Killearn Cente	er Boulevard		
(Mailing address MAY BE A POST OFFICE BOX)	Suite 100			
-	Tallahassee, FL 32309			
	rananaoooo, r E o			
D 16	e			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ords, enter the name of the new		
registered agent and/or the new registered office address her	<u>c</u> .			
Name of New Registered Agent:				
New Registered Office Address:	E	rida street address		
	Enter Fio	rida sireei aaaress		
	, 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 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 **Type of Action Name Address** ☐ Add Remove ☐ Add ☐ Remove Remove Remove  $\prod$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) November 7th 2011 Dated \_\_\_\_\_ Signature of a member or authorized representative of a member Teresa Turner Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00