

**L08000101382**

\_\_\_\_\_  
(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:

Office Use Only



**400300710924**

06/26/17 --01025--005 \*\*25.00

FILED

17 JUN 26 PM 2:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**S. WARREN**

**JUN 29 2017**

**MICHAEL D. TANNENBAUM**

*Attorney at Law*

2161 PALM BEACH LAKES BLVD.  
SUITE 304  
WEST PALM BEACH, FLORIDA 33409

WWW.MDTLAWOFFICE.COM

TELEPHONE (561) 471-1406  
FAX (561) 683-7551

June 20, 2016

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: ARLESS REALTY, LLC**

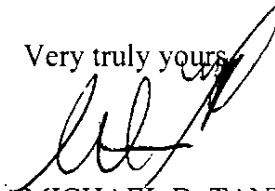
Dear Sir or Madam:

Please find enclosed Articles of Amendment to Articles of Organization for the above corporation together with a check in the amount of \$25.00

Kindly update your records to reflect the changes.

If you have any questions, please contact me.

Very truly yours,



MICHAEL D. TANNENBAUM

MDT/lr  
Enclosures

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

ARELESS REALTY, 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 OCTOBER 28, 2008 and assigned  
Florida document number L08000101382.

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 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:

MONTE SCHRIER

New Registered Office Address:

9200 159TH COURT NORTH

Enter Florida street address

JUPITER

Florida 33478

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

FILED  
17 JUN 26 PM 2:18  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MONTE SCHRIER	9200 159TH COURT NORTH	<input checked="" type="checkbox"/> Add
		JUPITER, FL 33478	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LESLIE FLETCHER	6288 RIVERWALK LANE, #6	<input checked="" type="checkbox"/> Add
		JUPITER, FL 33458	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SCOTT SCHRIER	8 ROCKWOOD LANE	<input checked="" type="checkbox"/> Add
		SUFFERN, NY 10901	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ARLENE SCHRIER	6656 WINDING LAKE DRIVE	<input type="checkbox"/> Add
		JUPITER, FL 33458	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
17 JUN 26 PM 2:18  
STATE  
TALLAHASSEE  
FLORIDA

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

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 6/12/17

Monte Schrier

Signature of a member or authorized representative of a member

MONTE SCHRIER

Monte Schrier

Typed or printed name of signer

FILED  
17 JUN 26 PM 2:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA