1090000/4373

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
·
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COVER LETTER

TO:	Registration S Division of Co		,*		
SUBJEC		Estate Association, LLC			
SOBJEC	JI:	Name of Lin	nited Liability Company		
		f Amendment and fee(s) are sub condence concerning this matter			
		Jeanne M Carter			
			Name of Person		
		New Name: Jeanne Carte Former Name: Star Real I			
			Firm/Company		
		P O Box 6978			20
			Address	,	
		Miramar Beach, FL 3255	0		2011 NOV 21
		_	City/State and Zip Code		
		icarter@starpros.com E-mail address: (to be used for future annual report notif	ication)	
For furth	er information	concerning this matter, please c	all:		2
Jeanne N	И Carter		850 259-9873		
-	Name	of Person	at () Area Code Daytime	Telephone Number	
Enclosed	l 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)	Certified C	of Status &
	Regist	LING ADDRESS: tration Section on of Corporations	STREET/COURING Registration Section Division of Corpora	n	

P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Jul

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Star Real Estate Association, LLC			
(Name of the Lim	ited Liability Com (A Florida Limited	pany as it now appears on our reco H Liability Company)	rds.)
The Articles of Organization for this Limited 1	Liability Compar	y were filed on 2/11/2009	and assigned
Florida document number L09000014373	·		
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name	of the limited lia	bility company here:	
Jeanne Carter Real Estate, LLC			
The new name must be distinguishable and contain the	words "Limited Lia	bility Company," the designation "LI	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	No change	
Principal office address MUST BE A STRE	ET ADDRESS)		
			~~~~
			CITY CITY
Enter new mailing address, if applicable:		No change	
Mailing address MAY BE A POST OFFICE	E BOX)		100 No gran
			12 mg 17 mg
			***
B. If amending the registered agent and			ds, enter the name of the new
registered agent and/or the new registered (	office address he	ere:	••
Name of New Registered Agent:	No change		
Name of New Registered Agent.		<del></del>	
New Registered Office Address:	No change		
		Enter Florida street addr	ress
			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, 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>	Address	Type of Action
		No changes to add remove or	☐ Remove
			Change
			Remove
			☐ Change
			Add
			Romove
			Charige
			□ Add □
			Renfjove
			Change
			Remove
			☐ Change
			□ Add
			Remove
			☐ Change

All

No other changes		
<u> </u>		
<del> </del>		
		<u> </u>
		2
		<del></del>
		<del>"</del>
	<del></del>	
effective date is listed, the date mu	e date of filing:  st be specific and cannot be prior to date of filing or model does not meet the applicable statutory filing epartment of State's records.	(optional) ore than 90 days after filing.) Pursuant to 605.02 g requirements, this date will not be listed
record specifies a delaye he 90th day after the rec	d effective date, but not an effective toord is filed.	ime, at 12:01 a.m. on the earlier
ed	. 2018	
	Signature of a member or authorized representative	of a member

Page 3 of 3

Note: In August of this year, I filed the requested Name Change as the Lieticians name -