

L09000044186

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

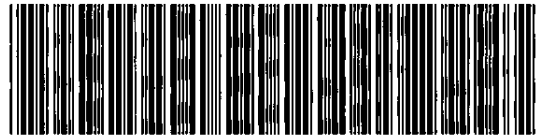
(Business Entity Name)

(Document Number)

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05/20/09--01010--019 **30.00

FILED
2009 MAY 28 PM 3:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
MAY 21 2009
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sawgrass Realty 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:

Nelda Parker-Pace

Name of Person

Sawgrass Realty LLC

Firm/Company

127 S. Jefferson St, Perry, Florida 32347

Address

Perry, Florida 32347

City/State and Zip Code

neldaparker@earthlink.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nelda Parker-Pace

Name of Person

at (850)

843-1823

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 21, 2009

NELDA PARKER PACE
SAWGRASS REALTY LLC
127 S. JEFFERSON STREET
PERRY, FL 32347

SUBJECT: SAWGRASS REALTY, LLC
Ref. Number: L09000044186

We have received your document for SAWGRASS REALTY, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 809A00017334

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2009 MAY 28 PM 3: 02

Sawgrass Realty, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/06/2009 and assigned
Florida document number 600155548216 / L090000 44186

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

127 S Jefferson St., Perry, FL 32347

(Principal office address MUST BE A STREET ADDRESS)

Perry, Florida 32347

Enter new mailing address, if applicable:

127 S Jefferson St., Perry, FL 32347

(Mailing address MAY BE A POST OFFICE BOX)

Perry, Florida 32347

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:

127 S Jefferson St., Perry, FL 32347

Enter Florida street address

Perry

, Florida

32347

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 Changing Registered Agent, Signature of New Registered Agent

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	Name	Address	Type of Action
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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

Dated _____

X Nelda Parker-Pace
 Signature of a member or authorized representative of a member

X Nelda PARKER-PACE
 Typed or printed name of signee

FILED
 2009 MAY 28 PM 3:02
 SECRETARY OF STATE
 TALAHASSEE, FLORIDA