

LD9000069248

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2012 NOV 13 PM 3:00

C. LEWIS
NOV 14 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Kirk Koehler Broker, 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:

Kirk W. Koehler

Name of Person

Vista Communities Realty

Firm/Company

100 Vista Royale Blvd, Suite B

Address

Vero Beach, FL 32962

City/State and Zip Code

kirk.koehler@att.net

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

For further information concerning this matter, please call:

Kirk W. Koehler

Name of Person

at (**772**) **562-8455**

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

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2012 NOV 13 PM 3:00

Kirk Koehler Broker, 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 July 20, 2009 and assigned
Florida document number L09000069248.

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:

(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:

New Registered Office Address:

Enter Florida street address

_____, 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 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

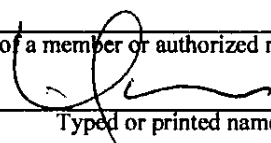
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	William Bueler Mills	100 Vista Royale Blvd, Suite B	<input checked="" type="checkbox"/> Add
		Vero Beach, FL 32962	<input type="checkbox"/> Remove
MGRM	Kirk W. Koehler	100 Vista Royale Blvd, Suite B	<input type="checkbox"/> Add
		Vero Beach, FL 32962	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated _____, _____.

Signature of a member or authorized representative of a member

Kirk W. Koehler



Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2012 NOV 13 PM 3:00

Listing Report: Sales

Page: 1

#	ML#	LP\$	Address	Unit#	#Beds	#FB	#HB	LB
1	129469	↓27,500	63 WOODLAND DR	205	1	1	1	0008
2	127007	29,900	43 WOODLAND DR	205	1	1	1	0229
3	131401	29,900	55 WOODLAND DR #105	105	1	1	1	0229
4	125572	30,000	49 WOODLAND DR	203	1	1	1	0008
5	127780	↓35,900	90 CROOKED TREE LN	203	1	1	1	0366
6	128942	37,500	88 CROOKED TREE LANE 20	203	1	1	1	007403
7	131975	37,500	35 PINE ARBOR LN	103	1	1	1	0334
8	101934	45,000	75 ROYAL OAK CT	103	1	1	1	0008