

L1 000000 7498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

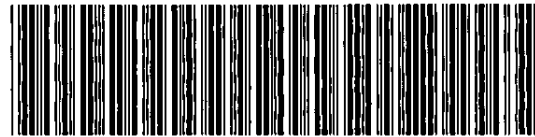
(Business Entity Name)

(Document Number)

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AUG 28 2013

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DEPARTMENT OF STATE
13 AUG 28 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
13 AUG 28 AM 10:15

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AND
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Withers :Assc. 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:

Daniel C. Withers
Name of Person

Withers :Assc Realty LLC
Firm/Company

411 Live Oak Plantation Rd
Address

Tallahassee FL 32312
City/State and Zip Code

Daniel@withers-Realty.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Withers at (850) 566-1818
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 AUG 28 AM 10:15

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Withers, Assoc. 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

13 AUG 28 AM 10:35

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AND
FILED

The Articles of Organization for this Limited Liability Company were filed on 11/21/10

Florida document number L10000007498

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)

411 Live Oak Plantation Rd
Tallahassee FL 32312

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

411 Live Oak Plantation Rd
Tallahassee FL 32312

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:

Same

New Registered Office Address:

411 Live Oak Plantation Rd
Enter Florida street address

Tallahassee
City

Florida

32312
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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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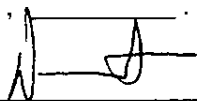
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 REMOVE

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

Dated

8/28/13



Signature of a member or authorized representative of a member

Daniel C. Withers

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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