

L1000045566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

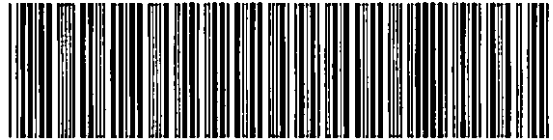
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/05/18--01011--021 \*\*170.00

FILED  
DEC 12 2018

D. SCOTT  
DEC 12 2018

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** REALSOURCE PROPERTY MANAGEMENT, 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:

RICHARD M. SEIN

Name of Person

REALSOURCE PROPERTY MANAGMENT, LLC

Firm/Company

6900 TURKEY LAKE ROAD, SUITE 2-3

Address

ORLANDO, FL 32819

City/State and Zip Code

RICK.SEIN@GMAIL.COM

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

For further information concerning this matter, please call:

RICHARD M. SEIN

407 298-9777

at ( )

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 &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

REALSOURCE PROPERTY MANAGEMENT, 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 APRIL 28, 2010 and assigned Florida document number 110000045586.

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:

RICHARD M. SEIN

New Registered Office Address:

6900 TURKEY LAKE ROAD, SUITE 2

*Enter Florida street address*

ORLANDO

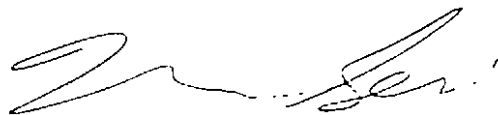
*City*

Florida 32819

*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>            | <u>Address</u>                                       | <u>Type of Action</u>                      |
|--------------|------------------------|--|--|
| MGR          | PATRICK F. SKIFFINGTON | 510 LAKE AVENUE,<br>ORLANDO, FL 32801                | <input type="checkbox"/> Add               |
|              |                        |  | <input checked="" type="checkbox"/> Remove |
|              |                        |  | <input type="checkbox"/> Change            |
| MGR          | RICHARD M. SEIN        | 6900 TURKEY LAKE ROAD,<br>SUITE 2, ORLANDO, FL 32819 | <input checked="" type="checkbox"/> Add    |
|              |                        |  | <input type="checkbox"/> Remove            |
|              |                        |  | <input type="checkbox"/> Change            |
| VP           | DAVID R. CHATBURN      | 6900 TURKEY LAKE ROAD,<br>SUITE 2, ORLANDO, FL 32819 | <input checked="" type="checkbox"/> Add    |
|              |                        |  | <input type="checkbox"/> Remove            |
|              |                        |  | <input type="checkbox"/> Change            |
|              |                        |  | <input type="checkbox"/> Add               |
|              |                        |  | <input type="checkbox"/> Remove            |
|              |                        |  | <input type="checkbox"/> Change            |
|              |                        |  | <input type="checkbox"/> Add               |
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|              |                        |  | <input type="checkbox"/> Add               |
|              |                        |  | <input type="checkbox"/> Remove            |
|              |                        |  | <input type="checkbox"/> Change            |

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(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)

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 \_\_\_\_\_



\_\_\_\_\_  
Signature of a member or authorized representative of a member

Typed or printed name of signee