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16 MAK - Z. PH 2: 35 SECRETARY OF STATE ALLAHASSEE, FLORID

WAR O 4 2 Price
J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Rame of Limited	Nearty, LL Liability Company	. <u>C</u>
The enclosed Articles of Amendment and fee(s) are submit	ted for filing.	
Please return all correspondence concerning this matter to t	he following:	
dulic	Hubbard Native of Person	
AQAn	Name of Person Pirm/Company	
P.O. B	X 7595 Address	
<u>Lakelar</u>	1d FL 33805 City/State and Zip Code	7
E-mail address: (10 b	e used for future annual report notification	on)
For further information concerning this matter, please call:	9	
Julia Hubbard Name of Person	at (803) LOOT-95 Area Code Daytime Tele	phone Number
Enclosed is a check for the following amount:		
\$25.00 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

February 19, 2016

JULIA HUBBARD PO BOX 7595 LAKELAND, FL 33807

SUBJECT: RESI SOUTH REALTY, LLC

Ref. Number: L10000083887

2016 HAR -2 PM 3: 37
SECREASSILE IN ORIGINAL

We have received your document for RESI SOUTH 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):

Please list the complete name of each Mgr.

- Sorry for ever

Please return 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 016A00003510

16 MAR -2 PH 2: 35
SECRETARY OF STATE

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it (A Florida Limited Liability	Realty LCC now appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were f	iled on 810200 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	, KLC
Enter new principal offices address, if applicable:	1 0, 6
(Principal office address MUST BE A STREET ADDRESS)	
	20 20 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enter new mailing address, if applicable:	75 2
(Mailing address MAY BE A POST OFFICE BOX)	77 35 17 15 35
B. If amending the registered agent and/or registered office a registered agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the nev</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
Cit	y 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 = Au	thorized Member		
<u>Title</u> MCR	Name Pahovit T Hokook W	Address 11020 S D' de Dd Ste	Type of Action
IVEN	nover to nurper iv	4030 S. Pipkin Rd Ste Lakeland FL 33811	
		Carean 1 - 00011	, ,
MGR	McAlpin T Miller	P.O. Box 7595	
		Lakeland Fl 3380	
		, <u> </u>	Change
MGR	Bryce J. Philpot	P.O. Box 7595	
		Lakeland, FL 338E	<u>∑</u> □ Remove
		·	Change
			Add
			□ Remove
			□ Change □ Add
		,	Remove
			Change Change
		7. F. C. R.	
		של .	₩ □ Remove
			Change

). If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if n	ecessary.)
. —-		
(If an effective Note: If the	date, if other than the date of filing:	p tional) fter filing.) Pursuant to 605.0207 (3) this date will not be listed as the
	d specifies a delayed effective date, but not an effective time, at 12:0 th day after the record is filed.	1 a.m. on the earlier of:
Dated	2/11/2016 . J.H	
	Signature of a member or authorized representative of a member	~
	Brian 6 Philost Typed or printed name of signee	SECULIAR -
	Page 3 of 3	2 1
	Filing Fee: \$25.00	2: 35 STATE LORID