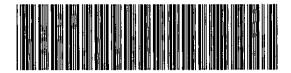
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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

JUL 1 6 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TLG Real Estate Services, PLLC

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:

Darcy Dunn

Name of Person

TLG Real Estate Services, PLLC

Firm/Company

217 John Knox Road

Address

Tallahassee, FL 32309

City/State and Zip Code

ddunn@tlhland.com

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

For further information concerning this matter, please call:

Darcy Dunn

at (850) 385-6363

Name of Person

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

TLG Real Estate Services, PLLC (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 02/24/2012 and assigned Florida document number <u>L12000026748</u> 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

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.

City

Zip Code

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>	Address	Type of Action
DS	Albert L. Buford, Jr.	217 John Knox Road	Add
		Tallahassee, FL 32303	Remove
DVP	A.L. Buford, III	217 John Knox Road	Add
		Tallahassee, FL 32303	Remove
D	Benjamin H. Wilkinson, Jr	217 John Knox Road	
		Tallahassee, FL 32303	Remove
DVP	Dan McSwain Ausley	217 John Knox Road	Add
		Tallahassee, FL 32303	Remove
			Add
			SECRETAR DIVISION OF C
			YOF SIAL CORESTANDING
			Remove

D. If amending any oth N/A	er information, enter change(s) here: (Attach additional sheets, if necessary.)
<u></u>	
 	
Dated July 9	2013
	081L
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE ON STATE ON STATE OF CORPORATIONS

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