12000138412

	•	
(Red	questor's Name)	
(Ado	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nam	ne)
(0-		
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
<u> </u>		

Office Use Only



500248685775

06/14/13--01024--018 **25.00

JUN 1 7 2013

T. HAMPTON

COVER LETTER

TO:

Registration Section
Division of Corporations

MANATEE REAL ESTATE, LLC

SUBJECT

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:

JACQUELINE A. MEEKER, ESQ.

Name of Person

KOONTZ & ASSOCIATES, PL

Firm/Company

1819 MAIN STREET, SUITE 910

Address

SARASOTA, FL 34236

City/State and Zip Code

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

For further information concerning this matter, please call:

JACQUELINE A. MEEKER

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

13 JUN 14 PH 12: 19	SECRETARY OF STATE STORE OF CORPORATIONS

Manatee Real Estate, LLC			records) O
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appears on our Liability Company)	records.)
The Articles of Organization for this Limited I Florida document number <u>L12000138412</u>		were filed on 10/31/201	2 and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited lish	oility company here:	
The new name must be distinguishable and end w	ith the words "Lim	ited Liability Company," the d	esignation "LLC" or the abbreviation
Enter new principal offices address, if appli	cable:	1517 State Street	
(Principal office address MUST BE A STREET ADDRESS)		Sarasota, FL 34236	
Enter new mailing address, if applicable:		1517 State Street	
(Mailing address MAY BE A POST OFFICE	BOX)	Sarasota, FL 34236	
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	Jan Horcic	ka	rds, enter the name of the ne
New Registered Office Address:	1517 State		in atmost a library
		Enier Floria	la street address
	Sarasota		Florida 34236
·		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

Page 1 of 3

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

Title	Name	Address	Type of Action
MGRM	Jan Horcicka	1819 Main Street	Add
		Suite 200	√ Remove
		Sarasota, FL 34236	
MGRM	Simona Horcickova	1819 Main Street	Add
		Suite 200	Remove
		Sarasota, FL 34236	
MGRM	Petra Tesařová	Praha 2	Add
		Vyesehradska 1269/29	Remove
		12800	
MGR	Jan Horcicka	1517 State Street	Add
		Sarasota, FL 34236	Remove
·			 ·
		ż.	Add Security
	,		L PHIZ:449
			Remove

amending any other	r information, enter change(s) here: (Attach additional sheets, if necessary.)
	·
June 3	2013
	,
	Signature of a member of authorized representative of a member
Jan Horo	1 1- 1/1/2/
	Typed of printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

13 JUN 14 PH 12: 19