

#L 13000000544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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06/03/13--01004--017 **25.00

FILED
13 JUN 24 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

JUN 25 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 4, 2013

APPRAISALS OF SOUTHWEST FLORIDA, LLC
JESSIE LLOYD
5534 YAHL ST, STE. B
NAPLES, FL 34109

SUBJECT: APPRAISALS OF SOUTHWEST FLORIDA, LLC
Ref. Number: L13000000544

We have received your document for APPRAISALS OF SOUTHWEST FLORIDA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 213A00013899

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Appraisals of Southwest Florida 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:

Jessie Lloyd
Name of Person

Appraisals of Southwest Florida LLC
Firm/Company

5534 Yahl Street Suite B
Address

Naples FL 34109
City/State and Zip Code

Appraisal @ Appswf.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessie Lloyd at (239) 593-6285
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" 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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Appraisals of Southwest Florida LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/02/13 and assigned
Florida document number L13000000544.

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:

NORMA Homan

New Registered Office Address:

4374 Broadleaf Cir

Enter Florida street address

Fort Myers

City

Florida

33908

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.

Norma Homan
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:

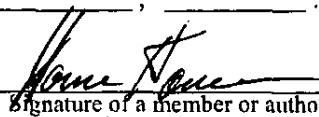
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	NORMA Homan	5534 Yahl Street suite B	<input checked="" type="checkbox"/> Add
		NAPLE FL 34109	<input type="checkbox"/> Remove
MGR	EARL Homan (Deceased)	5534 Yahl Street suite B	<input type="checkbox"/> Add
		NAPLES FL 34109	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated 6/19/13



Signature of a member or authorized representative of a member

Norma Homay

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00