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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Tillman Realty, 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:

Valarie J Tillman

Name of Person

Tillman Realty, LLC

Firm/Company

15485 Omai Ct.

Address

Fort Myers, FL 33908

City/State and Zip Code

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

For further information concerning this matter, please call:

Valarie J Tillman

,239,218-2730

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

Vtillman55@gmail.com

□\$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

Tillman Realty, LLC			
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on o Liability Company)	ur records.)	
The Articles of Organization for this Limited Liability Company	y were filed on January	16, 2013	_ and assigned
Florida document number L1300008976			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
The new name must be distinguishable and end with the words "Lim"L.L.C."	nited Liability Company," th	ne designation "LL	C" or the abbreviatio
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		2	ದ
		<u>≥ 12</u>	
		SSA	
Enter new mailing address, if applicable:			_ <u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		رب المار وربي المسار وساح وساع	<u> </u>
		F=7	<u>ය</u>
			
B. If amending the registered agent and/or registered of		ecords, enter the	e name of the ne
registered agent and/or the new registered office address he	<u>re</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Fl	orida street addre	SS
		, Florida	
- 112 	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

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Ma or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address I	vpe of Action
MGRM	Valarie J Tillman	15485 Omai Court	Add
		Fort Myers, FL 33908	Remove
			- Add
		<u>元</u> 元: : : :	Remove
		() () () () () () () () () ()	
		TO SEE	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

f amending any other information, e	enter change(s) here: (Attach additional sheets, if necessary.)
_d December 10	
Jalan	522 illman
-	of a member or authorized representative of a member
Valarie Tillman	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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