# 113000014535

(Re	equestor's Name)	
(Ad	ldress)	<u> </u>
(Ad	ldress)	<u> </u>
(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500250224145

08/01/13--01017--007 \*\*30.00

ZOTO AUG - 1 PM 1: 32

AUG 0 2 2013 D. 5RUCE

### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

Mark Hamilton, Realtor, 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:

## Mark Hamilton

Name of Person

Mark Hamilton, Realtor, LLC

Firm/Company

1058 NW 13th Street

Address

Stuart, FL 34994

City/State and Zip Code

mark@markhamiltonrealtor.com

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

For further information concerning this matter, please call:

# Mark Hamilton

Name of Person

772 214-0261

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

Mark Hamilton, Realtor, LLC		
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on ou Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liability C	Company were filed on 01/29/20	and assigned
Florida document number L13000014535	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
Mark I. Hamilton, LLC		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADD	RESS)	201
	-	
		35 0
Enter new mailing address, if applicable:		25.55 - 15.55
(Mailing address MAY BE A POST OFFICE BOX)	g address MAY BE A POST OFFICE BOX)	77 R M
B. If amending the registered agent and/or regis	stared office address on our rea	$\mathbb{P}^{n}$ $\omega$
registered agent and/or the new registered office add		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	rida street address
		_, Florida
	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 Manager or Managing Member being added or removed from our records:

MGR = M MGRM =	AGR = Manager AGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
<del></del>		<del></del>	Add		
			Remove		
			Add		
			Remove		
			Add		
			Remove		
		<u> </u>	Add Remitive		
			Remove		
			Add		
			Remove		
		<del></del>			
			Add		
			Remove		

If amending any other information, e	nter change(s) here: (Attach additional sheets, if necessary.)
July 30	2013
	Manusbur of a member or authorized representative of a member
Signature o	of a member or authorized representative of a member
Mark I. Hamilton	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

