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COVER LETTER

TO:

Registration Section
Division of Corporations

CLID IECT.

..C. FORD REAL ESTATE, 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:

LISA FORD

Name of Person

L.C. FORD REAL ESTATE, LLC.

Firm/Company

3627 BOBOLINK LN.

Address

ORLANDO, FL 32803

City/State and Zip Code

LISA@LISASELLSORLANDOHOMES.COM

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

For further information concerning this matter, please call:

LISA FORD

at (407) 963-4555

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

L.C. FORD REAL ESTATE, LLC.

company has been notified in writing of this change.

(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 vi Florida document number L13000021455	were filed on FEBRUARY 11, 2013 and assigned	ed
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Company," the designation "LLC" or the abbre	eviation
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 here:		ne new
Name of New Registered Agent:		
	4	
New Registered Office Address:	Enter Florida street address	
	APR -	-
	City , Florida Zip Code	Harris 4
New Registered Agent's Signature, if changing Registered Agent:	PH N	
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a	ete performance of my duties, and I am-familiar wit rovided for in Chapter 608, F.S. Or, if this documen	th and

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>	Name	Address	Type of Action
MGR	ANDREW FORD	3627 BOBOLINK LN.	Add
		ORLANDO, FL 32803	Remove
			
			Add
	•		Remove
			_
			Add
			Remove
		·	-
 			Add
			_ Remove
			Add
			Remove
			-
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove

.' If amending any other inform	nation, enter change(s) here: (Attach additional sheets, if necessary.)
ADDII 0	2013
ated APRIL 8	
6	4.8.13
Si	ignature of a member or authorized representative of a member
LISA FORD	
	Typed or printed name of signee

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Filing Fee: \$25.00