

L130000057050

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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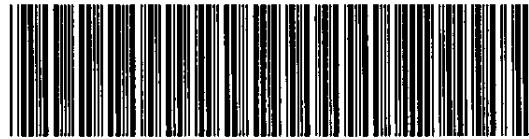
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04/25/13--01022--007 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 APR 25 AM 11:56

FILED

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **Velocity Realty Referral Services, LLC**

Name of Limited Liability Company

FILED
13 APR 25 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patricia Shockley

Name of Person

Velocity Realty Referral Services, LLC

Firm/Company

9378 Arlington EXPWY # 325

Address

Jacksonville/Florida 32225

City/State and Zip Code

pat@rivercityholdingsjax.com

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

For further information concerning this matter, please call:

Patricia Shockley

Name of Person

904 725-1217

at () 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**

Velocity Realty Referral Services, LLC

(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 were filed on 04-18-2013

Florida document number L13000057050

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:

New Registered Office Address:

Enter Florida 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

FILED
13 APR 23 AM 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGR = Manager
MGRM = Managing Member

Page 2 of 3

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

Dated _____

Patricia Shockley

Signature of a member or authorized representative of a member

Patricia Shockley

Typed or printed name of signee

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Filing Fee: \$25.00