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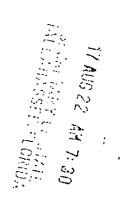
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# **COVER LETTER**

SUBJECT: FLORIDA BARGAIN 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:
HHMED SHIRAZ MUKHTAR
FLORIDA BARGAIN REAL ESTATE LIC
4864 JUN CITY CENTRE BLVD
SUN CITY CENTRE, FL33573 City/State and Zip Code
City/State and Zip Code  Wovenartrugs e quail. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
HHMED SHIRA2 MULHITAR at (321) 3/0 - 8355  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \\$30.00 Filing Fee \& \times \times \\$55.00 Filing Fee \& \times \times \times \\$60.00 Filing Fee, \times \

## MAILING ADDRESS:

Registration Section

**Division of Corporations** 

TO:

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

FORTON BARLATAL ROAL CATOTTE 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 $\frac{05/3}{20/3}$ and assigned
Florida document number <u>L 130000 70 373</u> .
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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."
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:
registered agent and/or the new registered office address here:
- 1985년 - 198
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, Florida $\stackrel{\circ}{\sim}$
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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member <u>Name</u> Title **Address** Type of Action AMBR BRANDON MICHAEL JOHNSON 4864 SUN CITY CENTRE BLUB - Add SUN CITY CENTRE, FL 33573 PRemove \_□ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Add Change ☐ Remove ☐ Change □ Add ☐ Remove

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ctive date, if other than the date of filing:	(optional)
ffective date is listed, the date must be specific and cannot be prior to date of filling or more than 90	days after filing.) Pursuant to 60
If the date inserted in this block does not meet the applicable statutory filing requirenment's effective date on the Department of State's records.	nems, this date will not be as
ecord specifies a delayed effective date, but not an effective time, at	12:01 a.m. on the earl
e 90th day after the record is filed. $8/18/17$	
d 8/18/17  Signature of a member or authorized representative of a member of a	

Page 3 of 3

Filing Fee: \$25.00