## L13000088694

	Requestor's Name)	
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	, waters	
(	City/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
(	Business Entity Name)	
	Document Number)	
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Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer;	
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## **COVER LETTER**

TO:

Registration Section

Division of Corporations			
	lorida Realty of SWFL, LLC		
SUBJECT:	Name of Li	mited Liability Company	<del> </del>
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	Joni Willoughby		
	_	Name of Person	
		Firm Company	
	9960 Estero Oaks Dr. Apt	201	
		Address	
	Fort Myers, FL 33967		
		City State and Zip Code	
	joniw 7:a gmail com	· 1 · 1 · 2 · 3 · 3 · 3 · 3 · 3 · 3 · 3 · 3 · 3	<u>~;</u> -;
For further information c	e-man adoress concerning this matter, please c	to be used for future annual report no all:	nacuion;
on: Willoughby		239 285-5198	
Name o	r Person	at ()	ne Telephone Number
inclosed is a check for th	ne following amount:		
喜 \$25 00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional cony is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration Section Division of Corporations		Registration Sc Division of Co	
P.O. Box 6327		The Centre of	•
Tallahassee, FL 32314		2415 N. Monre	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Premier Florida Realty of SWFL, 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{06}{19}(2013)\$ Florida document number 1.13000088694 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Joni Willoughby, Realtor, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LI C" or the abbreviation "LILC" 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

## 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

, Florida

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>Title</u>	<u>Name</u>	Address	Type of Action
			ZRemove
			□Change
			JAdd
			[]Change
			□Remove
		•	Change
			⊐Add
			□Remove
			TChange
			Dadd
			ERemove
			IChange
			□Add
			DRemove
			Il Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary,)
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lî an effeci <u>Note:</u> - If	e date, if other than the date of filing:
e record s d is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a m, on the earlier of: (b) The 90th day after the
Dated	August 3. 2020.  Jone M. Willowsky.  Signature of a member or authorized representating of a member
	Signature of a member or authorized representating of a member
	Joni M. Willoughby
	Typed or printed name of signee

Filing Fee: \$25.00