L14000030575

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

Div	ision of Corpo	rations			
SUBJECT:	Nest Commun	ities LLC			
SOBJECT.		Name of Limit	ed Liability Company		
The enclosed	l Articles of An	nendment and fee(s) are subm	nitted for filing.		
Please return	all corresponde	ence concerning this matter to	the following:		
		Brad Bartlett			
			Name of Person		<u>-</u>
		Nest Real Estate Group LLC	2		
			Firm/Company		_
		4134 29th Street East			
			Address		_
		Palmetto, FL 34221			
			City/State and Zip Code		_
		bradwbartlett@gmail.com			
		E-mail address: (to	be used for future annual re	port notification)	
For further in	nformation con	cerning this matter, please cal	II:		
Brad Bartlet	t			5997	
	Name of Po	erson	at () Area Code	Daytime Telephone Numb	er
Enclosed is a	a check for the	following amount:			
□ \$25.00 F	Filing Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	sed) Certifie	Filing Fee, cate of Status & ed Copy al copy is enclosed)

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TO:

Registration Section

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

Nest Communities LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Company Florida document number L14000030575	were filed on <u>2/24/2014</u>	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ulity company here:	
Nest Real Estate Group LLC		
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	-	· · · · · · · · · · · · · · · · · · ·
Principal office address MUST BE A STREET ADDRESS)		7.co 2
		Do De la Carrera
nter new mailing address, if applicable:		\$ 0 E
Mailing address MAY BE A POST OFFICE BOX)		T.C. 32 141
		08 F. 27
		D, 11 7
. If amending the registered agent and/or registered ogistered agent and/or the new registered office address her		s, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street addres.	s
	, Flo	orida
	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>Title</u> <u>Name</u> **Address Type of Action** □ Add □ Remove ☐ Change □ Add □ Remove _ Change _□ Add _□ Remove _□ Change □ Add _□ Remove □ Change SSS DRemove PH Change □ Add ☐ Remove

☐ Change

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Filing Fee: \$25.00