

L14000106348

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
DEC 18 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3MG REALTY, 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:

FREEMAN NESBITT

Name of Person

Firm/Company

10524 MOSS PARK RD STE 204-174

Address

ORLANDO, FL 32832

City/State and Zip Code

FREEMANNESBITT@AOL.COM

mpavilitz@gmail.com

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

For further information concerning this matter, please call:

MARINA PAVILITZ

321 945-1431

Name of Person

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

3MG REALTY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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2015 DEC 16 PM 12:28
CLERK OF THE STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on JULY 3, 2014 and assigned
Florida document number L14000106348.

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:

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	MEDIHA KOLAR	1420 WATER VIEW DR W #203	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
		LARGO, FL 33771	<input type="checkbox"/> Change
MGR	ROBIN MOORE	113 LAKE AVE SE	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
		LARGO, FL 33771	<input type="checkbox"/> Change
MGR	CARL ST PIERRE	1631 ROCK SPRINGS DR #202	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
		APOPKA, FL 32712	<input type="checkbox"/> Change
MGR	ELIZABETH ST PIERRE	1631 ROCK SPRINGS DR #202	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
		APOPKA, FL 32712	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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2015 DEC 16 PM 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2015 DEC 16 PM 12:28
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 12/03/2015

Signature of a member or authorized representative of a member

MARINA PAVILITZ
Typed or printed name of signee