14-000 189921

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300331273553

300331273553 07/02/19--01022--026 **75.00

19 JUL -2 AH 59 4.8
SECRETARY STATEMENT AND AND ADDRESS OF THE ADD

/JUL 1 6 2019



COVER LETTER

	1 1 1	Later of Comingle 116		
JECT:	andmark K	tealty of Seminole, LLC		
		Name of Limi	ted Liability Company	
enclosed A	rticles of A	Amendment and fee(s) are subr	nitted for filing.	
se return al	l correspoi	ndence concerning this matter t	to the following:	
		Kevin Chadwick		
			Name of Person	
		Landmark Realty of Semin	ole LLC	
			Firm/Company	
		5666 Seminole Blvd. Suite	1	
			Address	
		Seminole Fl 33772		
		kwchadwick@gmail.com	City/State and Zip Code	
			to be used for future annual report notif	ication)
further info	ormation co	oncerning this matter, please ca		,
in Chadwi		-	813 352-1266	
	Name o	f Person	at () Area Code Daytime	Telephone Number
losed is a c	heck for th	ne following amount:		
\$25.00 Fili	ng 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

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

Landmark Realty of Seminole LLC	<u></u> _	
(Name of the Limited Liab (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability lorida document number L1000189927 L191	y Company were filed on 01/01/2015	and assigned
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the li	imited liability company here:	
he new name must be distinguishable and contain the words "I	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 AD	DRESS)	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, ente address here:	erethe name of the
Name of New Registered Agent:		No. 1
		-
New Registered Office Address:	Enter Florida street address	6•
_	, Florida	Zip Code
	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>	Type of Action
MGR	Rachel Sartain	111 2nd Ave. NE Suite 400 St. Petersburg FL 33701	= Add
			Remove
			Change
MGR	Christi J. Jensen	St. Petersburg FL 33701	
			☐ Remove
			Change
			□ Remove
			Change
			□ Remove
			Change
			D Add
			Remove
			, □ Add
			Change

					_
					
					_
	***, ***				
					_
					_
	·				
					_
					_
					_
			-		
					_
				(A! N	
	other than the date of isted, the date must be speci		date of filing or more than	(optional) 90 days after filing.) Pursuant to 6	605.0207 (3
Note: If the date in	serted in this block does	not meet the applicabl		ements, this date will not be l	
document's effecti	ve date on the Departmen	nt of State's records.			
	fies a delayed effect after the record is f		in effective time, a	t 12:01 a.m. on the ea	rlier of:
The Sour day	arear tire record is r	nca.			
June 14		2019			
Dated		→ , / —			
		-/u/hw	/_		
	Signatur	e of a member or authoriz	ed representative of a mer	nber	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00