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17 DEC -8 PH 4: TO

S. WARREN DEC 1 1 2017

COVER LETTER

Division of Co	rporations		
TODD W	PILLARS LLC		
	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Todd W Pillars		
	- · · · · · · · · · · · · · · · · · · ·	Name of Person	
	Todd W Pillars LLC		
		Firm/Company	
	5618 Wellfield Rd.		
		Address	
	New Port Richey, FL 34655	5	
		City/State and Zip Code	
	todd@toddpillars.com		
	E-mail address: (t	to be used for future annual report notifi	cation)
For further information of	concerning this matter, please ca	ill:	
Todd W Pillars		727 967-6637	
Name (of Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for t	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

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

TODD W PILLARS 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 and assigned L15000007656 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Pillars & Associates Real Estate, LLC 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_. Florida ____

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records:</u>

MGR = · Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Pillars, Todd W	5618 Wellfield Rd	□ Add
		New Port Richey, FL 34655	☐ Remove
			🗏 Change
			□ Add
			□ Remove
			Add
			□ Remove
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			_□ Add
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		BASSE TO THE COLUMN TO THE COL	_ dd://
			Change

		
		
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fective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or	ore than 90 days after filing.) Pursuant to 605.020
ote: If the date inserted in this block does not meet the applicable statutory file		
ocument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective	ime, at 12:01 a.m.	on the earlier o
The 90th day after the record is filed.		
12-5 2017		
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A. 1111 A.M	2.0	17
Jaa W/llan	<u> </u>	
Signature of a member or authorized representati	of a member	<u> </u>
Todd W Pillars	50	-6 E
Typed or printed name of signee		

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Filing Fee: \$25.00