## 115000039470

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OR OTHER STATE

## **COVER LETTER**

	Registration Se Division of Cor				
SUBJEC		lms Real Estate Group, LLC			
SUBJEC	-1:	Name of Lin	nited Liability Company	······	
The encl	osed Articles of	Amendment and fee(s) are sub	emitted for filing.		
Please re	turn all correspo	ndence concerning this matter	to the following:		
		Teresa Martini			
			Name of Person		
		Twisted Palms Real Estate	e Group, LLC		
			Firm/Company		
		5507 Broad River Run			
			Address		SEC SIG
		Ellenton/Florida 34222			APR
		<del></del>	City/State and Zip Code		SSE - 3
		tmartini1023@gmail.com			
		E-mail address:	to be used for future annual report notif	ication)	13 M 9 18
For furth	er information c	oncerning this matter, please of	all:		8 31 8
Teresa N	Martini		386 872-0408		
	Name o	f Person		Telephone Number	<del></del>
Enclosed	l is a check for th	ne following amount:			
\$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Cereation Section Sec	n ations	

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Twisted Palms Real Estate Group, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	<del>"</del> -
The Articles of Organization for this Limited Liability Company	were filed on 3/4/2015	and assigned
Florida document number L15000039470		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	vility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5707 Broad River Run	
(Principal office address MUST BE A STREET ADDRESS)	Ellenton, Florida 34222	
Enter new mailing address, if applicable:	5707 Broad River Run	
(Mailing address MAY BE A POST OFFICE BOX)	Ellenton, Florida 34222	<u> </u>
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records,	enter the name of the ne
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da 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 or removed	Authorized Person(s) authorized to n from our records:	nanage, <u>enter the title, name, an</u>	d address of each person being added
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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		-	☐ Remove
			☐ Change
<del></del>		***************************************	
			Remove
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(optional) g or more than 90 days after filing.) Pursuant to 605.0207 (
filing requirements, this date will not be listed as t
ive time, at 12:01 a.m. on the earlier of:
)

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00