

L1500160253

(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



600288865826

08/15/16--01020--014 **25.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 AUG 15 PM 4:45

AUG 16 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Emerald Realty Pros
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:

Alexandria Martin
Name of Person

Emerald Realty Pros
Firm/Company

3751 S Nova Rd Suite D
Address

Port Orange, FL 32129
City/State and Zip Code

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

For further information concerning this matter, please call:

Alexandria Martin at (386) 690-0564
Name of Person 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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 AUG 15 PM 4:45

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Emerald Realty Pros

(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 9/21/15 and assigned
Florida document number L15000160253

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 "L.L.C."

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:

Alexandria Martin

New Registered Office Address:

3751 S Nova Rd Suite D

Enter Florida street address

Port Orange

City

Florida

32129

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.


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>
<u>AMBR</u>	<u>Alexandria Martin</u>	<u>2200 Pope Ave</u>	<input type="checkbox"/> Add
	<u>3751 S. NOVA Rd</u>	<u>South Daytona, FL 32119</u>	<input type="checkbox"/> Remove
	<u>Port Orange, FL</u>	<u>32129</u>	<input checked="" type="checkbox"/> Change
<u>Shareholder</u>	<u>Steven Bowie</u>	<u>3751 S. Nova Rd. Suite D</u>	<input type="checkbox"/> Add
		<u>Port Orange, FL 32129</u>	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
<u>Shareholder</u>	<u>Eric Kelley</u>	<u>3751 S. Nova Rd Suite D</u>	<input type="checkbox"/> Add
		<u>Port Orange, FL 32129</u>	<input type="checkbox"/> Remove
			<input checked="" 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
JAN 11 2011
PM 4:45

18

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
19 AUG 15 PM 4:45

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 Aug 4, 1911, _____

Signature of a member or authorized representative of a member

Alexandra Martin
Typed or printed name of signer