

L16000021909

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2016 MAR 28 PM 1:40
CLERK OF STATE
TALLAHASSEE, FL 32301

K. SALLY
EXAMINER
MAR 30

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Julie Lasky Mueller 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:

Frank S Pruse Jr.

Name of Person

Julie Lasky Mueller LLC

Firm/Company

505 East Jackson Street Suite 308

Address

Tampa, Florida 33613

City/State and Zip Code

fpruse@gmail.com

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

For further information concerning this matter, please call:

Frank S. Pruse Jr.

813 841-8043
at ()

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

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

JULIE LASKY MUELLER LLC

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

FILED
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CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 02/03/2016 and assigned

Florida document number L16000021909

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

THE JULIE LASKY MUELLER REALTY GROUP LLC

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:

505 East Jackson Street Suite 308

(Principal office address MUST BE A STREET ADDRESS)

Tampa, Florida 33602

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>
AMBR	Julie Lasky Mueller	808 N. Franklin St. Suite 1614	<input type="checkbox"/> Add
		Tampa, Florida 33602	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Russ Fitzpatrick	808 N. Franklin St. Suite 1614	<input type="checkbox"/> Add
		Tampa, Florida 33602	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Frank S. Pruse Jr.	6249 Ashbury Palms Dr.	<input checked="" type="checkbox"/> Add
		Tampa, Florida 33647	<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

2016 APR 28 PM 4:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2019 MAR 28 11:05 AM
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FILED
2019 MAR 28 PM 1:40
JULIAN, MISSOURI
CLERK OF COURT

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 March 24, 2016

[Signature]

Frank S. Pruse Jr.

Filing Fee: \$25.00