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### Greetings,

 $This \, was \, a \, mistake \, by \, the \, DBPR \, rejecting \, my \, request \, for \, Trey \, Sanders \, LLC \, and \, informing \, me \, that \, it \, had \, informing \,$ to be Sanders, Trey LLC. After further investigations, that rep was wrong and Trey Sanders LLC is allowed for my Realtor's state license. Please revert to Trey Sanders LLC. Thanks in advance!

All the best,

Trey Sanders (813) 940-6059 trey@elite71.com

# **COVER LETTER**

Sanders, T	rev II C		
SUBJECT:			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	,
Please return all corresp	ondence concerning this matter	to the following:	
	Trey Sanders		
		Name of Person	
		Firm/Company	
	16606 Royal Palm Drive #	1138	
		Address	
	Tampa, FL 33647		
	trey@elite71.com	City/State and Zip Code	
		to be used for future annual report notifi	ication)
For further information	concerning this matter, please c	all:	
Trey Sanders		813 940-6059 at ( )	
Name	of Person	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
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

Sanders, Trey LLC		
( <u>Name of the Limited Liab</u> (A Flori	Ility Company as it now appears on our records.) ida Limited Liability Company)	Million Million To The Control of th
The Articles of Organization for this Limited Liability	Company were filed on 05/31/2016	and assigned
lorida document number L16000104794	·	
his amendment is submitted to amend the following:		
If amending name, enter the new name of the lin	mited liability company here:	
rey Sanders LLC		
he new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
• •	DAEGC\	
<u>Principal office address MUST BE A STREET ADL</u>	(KESS)	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
Turning www.csg.ing.c. pp.://obj.or.1102.porty		
3. If amending the registered agent and/or reg	rictored office address on our records enter	r the name of th
s. If amending the registered agent and/or reg registered agent and/or the new registered office ad		<u>~</u> υ
ogisterou agent and or the new registerou cristo		' 결정 기
Name of New Registered Agent:		37 T 100 100 100 100 100 100 100 100 100 1
Now Designational Office Address		SEX T
New Registered Office Address:	Enter Florida street address	
<del></del>	, Florida	<b>ガジ ー</b>
	Cin	

## 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 = A	authorized Member		
<u>Title</u>	Name	Address	Type of Action
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			☐ Remove
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(If an effecti	date, if other than the date of five date is listed, the date must be specific the date inserted in this block does not be a constant.	and cannot be prior to	late of filing or more than	(optional) 190 days after filing.) Purs	uant to 6 not be li	05.0207 (3)( sted as the
	s effective date on the Department		o sactiony ming roqui	Tomonis, and date with		
	d specifies a delayed effective the day after the record is file		n effective time,	at 12:01 a.m. on t	he ear	lier of:
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Dated	5 a 6 Signature	,				

Page 3 of 3

Filing Fee: \$25.00