## L14000155423

(Requestor's Name)	-
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
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(Business Entity Name)	_
(Document Number)	_
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## **COVER LETTER**

Division of Co			
Great Nor	hern Realty, LLC		
SUBJECT:	Name of Limited Lia	bility Company	
The enclosed Articles of	Amendment and fee(s) are submitted	for filing.	
Please return all corresp	ondence concerning this matter to the f	ollowing:	
	Paul J. Lagassey, Manager		
	1	Name of Person	
		Firm/Company	<u></u> ·
	PO Box 643207		
		Address	
	Vero Beach, FL 32964		
		State and Zip Code	
	paul@lagassey.com	1.0	
For further information	concerning this matter, please call:	ed for future annual report notification)	AHA SEP
Paul J. Lagassey		772 473-5900 at ( )	
Name	of Person	Area Code Daytime Teleph	one Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	Certificate of Status	S55.00 Filing Fee & C Certified Copy (additional copy is enclosed)	1 \$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

Great Northern Realty, 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 August 18, 2016  Florida document number L16000155423	_ and assigned
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 abbre	viation "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)	
	Z. 2
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:	Parties Control
$ ilde{m{v}}$ . $ ilde{m{v}}$	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	5 =
, Florida	_
	Zin 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>	Type of Action
MGR	Red Rock Realty, LLC	611 Date Palm Road	□ Add
		Vero Beach, FL 32963	Remove
			Change
MGR	Paul J. Lagassey	611 Date Palm Road	<b>_=</b> Add
		Vero Beach, FL 32963	Remove
			Change
			Add
		<del></del>	Remove
			Change
			Remove
			Change
			Add
			□ Remove
			☐ Change
			☐ Add
			□ Remove
			□ Change

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Effective date, if other than the date of filing:  If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 9.  Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.		
he record specifies a delayed effective date, but not an effective time, at The 90th day after the record is filed.	t 12:01 a.m. on the earlie	r of:
Dated August 23 2016		
Dated		

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Typed or printed name of signee

Filing Fee: \$25.00