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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

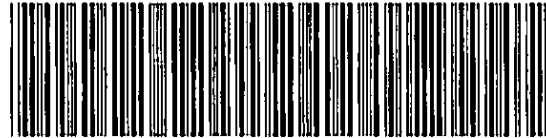
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 OCT -4 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. WARREN

OCT 04 2017



Barry L. Miller*

Jonathan Innes

David Berman

Michael Burgess, *Paralegal*

Christian Walters, *Paralegal*

October 3, 2017

VIA U.S. MAIL

Florida Dept. of State.
Division of Corporations
2661 Executive Center Cir.,
Tallahassee, Florida 32301

Re: Clock Tower Realty, LLC

To Whom It May Concern:

Enclosed please find one (1) original and one (1) copy of the Articles of Amendment for Clock Tower Realty, LLC. Kindly file the same and return one time-stamped from your office. A return mail envelope has been enclosed for your convenience.

Please do not hesitate to contact the undersigned if you have any questions. Our telephone number is 407-581-2964, and you can reach us via email at info@BarryMillerLaw.com

PLEASE GOVERN YOURSELF ACCORDINGLY.

Sincerely,

A handwritten signature in black ink, appearing to be 'Barry L. Miller', with a stylized flourish at the end.

Barry L. Miller, Esq.,
For the Firm

Copies Furnished to:

- Client.

11 N. Summerlin Avenue, Suite 100, Orlando, FL 32801-2959

P: (407) 423-1700 | F: (407) 425-3753

BarryMillerlaw.com

*Admitted Florida, New York, Massachusetts

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Clock Tower Realty, 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:

Mark G. Hide

Name of Person

Clock Tower Realty, LLC

Firm/Company

213 S. Dillard St., Ste: 220-D

Address

Winter Garden, Florida

City/State and Zip Code

Mark@ClockTowerRealty.Net.

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

For further information concerning this matter, please call:

Christian C. Walters, Paralegal, Barry L. Miller, P.A.

407

581-2964

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**

Clock Tower 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 10/11/2016 and assigned
Florida document number 1.16000187680.

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: _____

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

FILED
OCT - 4
PM 2:26
CLERK OF DISTRICT COURT
STATE OF FLORIDA

MGR = Manager
AMBR = Authorized Member

FILED

17 OCT - 4 PM 2:26

☐ Change
☐ Remedy
☐ Add
☐ Cancel

ST. JACOB DIST.
TALLAHASSEE, FLORIDA

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated 29 September, 2017

Math

Signature of a ~~member~~ or authorized representative of a member

Mark G. Hide, Manager

Typed or printed name of signee

FILED
17 OCT -4 PM 2:28
SOUTH FLORIDA
TALLAHASSEE, FLORIDA