(Re	questor's Name)	<u> </u>
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of Co	rporations			
	EALTY REFERRAL, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	(Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		KATHERINE BORDELON		
		Name of Person	<del></del>	
		Firm/Company	<del></del>	
	2550 CARTER GROVE CIRCLE			
Address				
	,	WINDERMERE, FL 34786		
		City/State and Zip Code		
		therine@castleandcottage.com		
	E-mail address: (	to be used for future annual report no	diffication)	
For further information	concerning this matter, please c	all:		
KATHERINE BORDE	LON	407 620-9405 at ()		
Name	of Person	Area Code Dayti	me Telephone Number	
Enclosed is a check for t	the following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addre		Street Address:	ogtion	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C & C R	EALTY REFERRAL, LLC	
( <u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appears on our da Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability	Company were filed on $\frac{10/24/2016}{2}$	and assigned
Florida document number L16000195620	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lu	mited Liability Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	2070 J
		<u>∓</u>
Enter new mailing address, if applicable:		∞ ·
Mailing address MAY BE A POST OFFICE BOX)		
		<u>.</u>
		' <sub>in</sub> <b>o</b>
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		enter the name of the new register
agent and/of the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida streed	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>	Type of Action
P/CEO	BORDELON, KATHERINE	2550 CARTER GROVE CIRCLE	
		WINDERMERE, FL 34786	=Remove
			□ Change
MGR	BORDELON, KATHERINE	2550 CARTER GROVE CIRCLE	Add
		WINDERMERE, FL 34786	Remove
			□ Change
		<del> </del>	□ Add
			□Remove
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(If an effective Note: If the	date, if other than the date of e date is listed, the date must be spec- ne date inserted in this block does is effective date on the Departme	itic and cannot be pri s not meet the appl	or to date of filing or icable statutory fil	more than 90 days after	filing.) Pursuant to 605	
he record sp ord is filed.	ecifies a delayed effective date. b	ut not an effective	time, at 12:01 a.m	on the earlier of: (b	) The 90th day afte	r the
Dated	January 06th	2020				
	Ci)cak(1.	Bili				
	( Signatu	e of a member or au	horized representati	ve of a member		
		KATHER	INE BORDELON			

1 - 1 - 1 - **4** 

Filing Fee: \$25.00