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M. MILLIGAN
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COVER LETTER

Division of Cor				
SUBJECT: 21 Century	Realty Services of Jacksonville			
	Name of Limited Liability Company			
The enclosed Articles of	Amendment and fee(s) are submitted for filing.			
Please return all correspo	ondence concerning this matter to the following:			
	Dexter L. Binder			
	Name of Person			
21 Century Realty Services of Jacksonville				
	Firm/Company			
	7243 Glendyne Drive South			
	Address			
	Jacksonville, Florida 32216			
	City/State and Zip Code			
	stubbstaxservice@gmail.com E-mail address; (to be used for future annual report notification)			
For further information c	concerning this matter, please call:			
Dexter L. Binder	904 608-5507 at ()			
Name o	at (
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status 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

21 Century Realty Services of Jacksonvi		San
(<u>Name of the Limited Li</u> (A F	ability Company as it now appears on our re lorida Limited Liability Company)	ecords.)
·		<i>``</i> '€' '
The Articles of Organization for this Limited Liabili	ity Company were filed on December 16	and assigned 3
Florida document number L16000227234		
		250
This amendment is submitted to amend the following	g:	A CONTRACTOR OF THE CONTRACTOR
A. If amending name, enter the new name of the	limited liability company here:	
21st Century Realty Services of Jacksonville 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	:	
(Principal office address MUST BE A STREET A		
Trincipal office dataless most be 7 street 7		
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
B. If amending the registered agent and/or r		ords, enter the name of the nev
registered agent and/or the new registered office	address here:	
Name of New Registered Agent:		
New Registered Office Address:		
<u></u>	Enter Florida street a	ddress
		. 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 = N $AMBR = A$	lanager authorized Member		
Title	<u>Name</u>	Address	Type of Action
			Add
			Remove
			☐ Change
			Add
			☐ Change
			□ Remove
			Change
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(21st Century Realty Services	of Jacksonville LTC)	
<u> </u>		
		,
fective date, if other than the an effective date is listed, the date must	date of filing:	(optional) than 90 days after filing.) Pursuant to 605.02
ote: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing re-	quirements, this date will not be listed
delinent y encourre date on the 150	parament of State Steekings.	
record specifies a delayed The 90th day after the reco	effective date, but not an effective time ord is filed.	e, at 12:01 a.m. on the earlier
December 21	2016	
iteu	\mathcal{L}	
Dexte	Signature of a member of authorized representative of a	member
Dexter L. Binder	Signature of a member or authorized representative of a	member .

Page 3 of 3

Filing Fee: \$25.00