

LI70000 7646'2

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

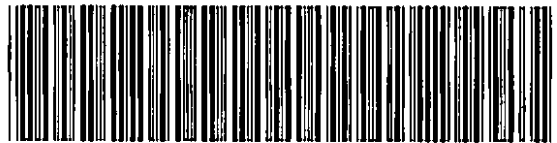
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200350026982

08/18/20--01032--021 **30.00

2020 AUG 18 PM 4:44
U.S. DEPT. OF JUSTICE
U.S. E.D.

SEP 29 2020

M. SOLOMON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Offerpad Brokerage "FL," LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Raechel Wray

Name of Person

Offerpad, LLC

Firm/Company

2150 E Germann Rd., Ste 1

Address

Chandler, AZ 85286

City/State and Zip Code

raechel.wray@offerpad.com

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

For further information concerning this matter, please call:

Raechel Wray

480

605-0769

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Offerpad Brokerage "FL," 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 April 6, 2017 and assigned
Florida document number L17000076462.

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

City

Florida

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>	<u>Type of Action</u>
MGR	Edward E. Marino	2150 E Germann Rd	<input type="checkbox"/> Add
		Ste 1	<input checked="" type="checkbox"/> Remove
		Chandler, AZ 85286	<input type="checkbox"/> Change
MGR	Robert E. Jones	2150 E Germann Rd	<input checked="" type="checkbox"/> Add
		Ste 1	<input type="checkbox"/> Remove
		Chandler, AZ 85286	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2020 AUG 18 PM 4:44
 RECEIVED
 11-ED

1. What is the main purpose of the study?

2. What are the research objectives?

3. What is the research methodology?

4. What are the results of the study?

5. What are the conclusions of the study?

6. What are the limitations of the study?

7. What are the implications of the study?

8. What are the future research directions?

9. What are the contributions of the study?

10. What are the key findings of the study?

2020 AUG 18 PM 4:44

1

(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 August 12, 2020

Adam Martinez

Signature of a member or authorized representative of a member

By Offerpad, LLC, Adam Martinez Head of Legal

Typed or printed name of signee

Filing Fee: \$25.00

15 0 0010 17 00 0101 701 00 0010 1751 0/010