

L17000078514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

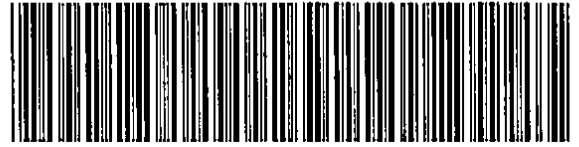
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2019 MAY 13 PM 5:24

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Amund

MAY 23 2019
ALBRITTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Wolves of Real Estate 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:

Brandon T Ingoldsby

Name of Person

Wolves of Real Estate LLC

Firm/Company

555 W Granada Blvd, Unit C-2

Address

Ormond Beach, FL 32174

City/State and Zip Code

bingoldsby@wolvesrealty.com

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

For further information concerning this matter, please call:

Brandon T Ingoldsby

386 882-4312
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

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2019 MAY 13 PM 5:24
and assigned

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Ormond Beach, FL 32174

Ormond Beach, FL 32174

Zip Code

Page 1 of 3

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	Brandon T Ingoldsby	260 Country Circle Drive West	<input type="checkbox"/> Add
		Port Orange, FL 32128	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Joshua J Aronovitch	2200 S Palmetto Avenue, Unit B3	<input checked="" type="checkbox"/> Add
		South Daytona, FL 32119	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jamie L Graham	236 Ashford Court	<input checked="" type="checkbox"/> Add
		Ormond Beach, FL 32174	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated _____, _____

Typed or printed name of signee