

L17000119134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

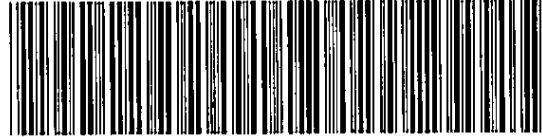
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2019 SEP 11 PM 12:49
TALLAHASSEE FLORIDA

FILED

SEP 9 2019

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MY BROKER REAL ESTATE EXECUTIVES FLORIDA, 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:

PAULA ANN BLACK, MGR

Name of Person

MY BROKER REAL ESTATE EXECUTIVES FLORIDA, LLC

Firm/Company

5650 SOUTH SEA OTTER PATH, #14

Address

HOMOSASSA, FL 34448

City/State and Zip Code

PAULABLACKREALTOR@YAHOO.COM

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

For further information concerning this matter, please call:

PAULA BLACK, MGR

407 908-1553

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

FLORIDA,
MY BROKER REAL ESTATE EXECUTIVES, LLC

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

FILED

2019 SEP 11 PM 49

The Articles of Organization for this Limited Liability Company were filed on 5/31/2017 and assigned
Florida document number 117000119134

TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

n/a

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:

n/a

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P. O. Box 568

Homosassa, FL 34487

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:

n/a

New Registered Office Address:

5650 South Sea Otter Path, #14

Enter Florida street address

Homosassa

Florida 34448

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>	<u>Type of Action</u>
MGR	Consolidated Estates Executives Florida, LLC	11401 US Highway 301 North Thonotosassa, FL 33592	<input type="checkbox"/> Add
		PLEASE REMOVE -----	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PAULA ANN BLACK	5650 SOUTH SEA OTTER PATH, #14, HOMOSASSA FL <input checked="" type="checkbox"/> 34448	<input checked="" type="checkbox"/> Add ✓ <i>please mgr</i>
		PLEASE CORRECT AND ADD-----	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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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 SEPT 9, 2019. POD

Paula Ann Black, Mgr -
Signature of a member or authorized representative of a member

PAULA ANN BLACK, MGR. MY BROKER REAL ESTATE EXECUTIVES FLORIDA, LLC
Typed or printed name of signee