

L17000138020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

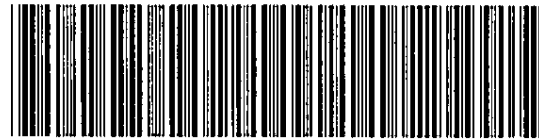
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600302869466

08/24/17--01012--001 **25.00

17 SEP 26 AM 8:49
CLERK OF COURT, FLORIDA

SEP 20 2017

Y CULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 14, 2017

MARISA ANNA MARIA SCHVARTZ
2722 CORONA BOREALIS DR
ORLANDO, FL 32828

SUBJECT: SCHVARTZ REALTY LLC
Ref. Number: L17000138020

We have received your document for SCHVARTZ REALTY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 117A00017587

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SCHVARTZ REALTY 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:

MARISA ANNA MARIA SCHVARTZ

Name of Person

Firm/Company

12061 MAGAZINE STREET, APT 11204

Address

ORLANDO, FLORIDA 32828

City/State and Zip Code

marisa@schvartzhomes.com

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

For further information concerning this matter, please call:

MARISA SCHVARTZ

407 325-0516

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input 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**

SCHVARTZ REALTY 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 26 JUNE, 2017 and assigned
Florida document number L17000138020.

This amendment is submitted to amend the following:

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

MARISA SCHVARTZ 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:

12061 MAGAZINE STREET

(Principal office address MUST BE A STREET ADDRESS)

APT 11204

ORLANDO, FLORIDA 32828

Enter new mailing address, if applicable:

12061 MAGAZINE STREET

(Mailing address MAY BE A POST OFFICE BOX)

APT 11204

ORLANDO, FLORIDA 32828

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:

12061 MAGAZINE STREET, APT 11204

Enter Florida street address

ORLANDO

Florida

32828

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>
			<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
			<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SEP 26 AM 8:43
U.S. SEC. FLORIDA

17 SEP 20
0900 SET

17 SEP 20 AM 8:41

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 27 SEPTEMBER, 2017



Signature of a member or authorized representative of a member

MARISA ANNA MARIA SCHVARTZ

Typed or printed name of signee