## 117000176077

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## **COVER LETTER**

	Registration Se Division of Cor			
SUD 167		EALTY, LLC		
SUBJEC	TT:	Name of Lim	ited Liability Company	
The encl	osed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		TIMOTHY HOLDY		
			Name of Person	
		HOLDY REALTY, LLC		
		-	Firm/Company	<del></del>
		469 NW FETTERBUSH V	VAY	
			Address	
		JENSEN BEACH, FL 349	57	
			City/State and Zip Code	
		tim@holdy.com		
		E-mail address: (	to be used for future annual report notif	ication)
For furth	er information co	oncerning this matter, please ca	all:	
TIMOTI	IY HOLDY		772 500-0001	
	Name of	f Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
<b>3</b> \$25.0	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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOLDY 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 $\frac{\text{AUGUST 17. 2017}}{\text{AUGUST 17. 2017}}$ and assigned Florida document number $\frac{\text{L17000176077}}{\text{L17000176077}}$ .	
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 "LLC"	
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	  не пем
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	<u>_</u>
New Registered Office Address:	
Enter Florida street address ,	-
City Stip Coile	
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 wi	th the

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>	Address	Type of Action
AMBR	TIMOTHY HOLDY	469 NW FETTERBUSH WAY	Add
		JENSEN BEACH, FL 34957	■ Remove
		<del></del> -	Change
MGR	RODNEY HENSON	5341 NW 79TH AVENUE	
		DORAL, FL 33166	Remove
			□ Change
		<del></del>	□ Add
			Remove
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ctive date, if other than the date of filing: _				(optional		
effective date is listed, the date must be specific and cam e: If the date inserted in this block does not meet	not be prior to c the applicable	date of tiling e statutory	or more than 90 i filing requirem	days after filing ents, this date	g.) Pursuan 2 will not	t to 605.0 be listed
ument's effective date on the Department of State	's records.	,				
record specifies a delayed effective date he 90th day after the record is filed.	e, but not a	in effectiv	ve time, at 1	.2:01 a.m.	on the	earlie
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00