## C17000178407

(Re	equestor's Name)	<u> </u>
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		12/13
		1110

Office Use Only



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UEU : S S. PRATHER



November 29, 2018

MATTHEW REDMER HERO REALTY, LLC 532 ABBOTSFORD COURT SAINT JOHNS, FL 32259

SUBJECT: HERO REALTY, LLC Ref. Number: L17000178407

We have received your document for HERO 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6900.

Letter Number: 518A00024414

Stacy Prather Regulatory Specialist III

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October 3, 2018

MATTHEW REDMER HERO REALTY, LLC 532 ABBOTSFORD COURT SAINT JOHNS, FL 32259

SUBJECT: HERO REALTY, LLC Ref. Number: L17000178407

We have received your document for HERO 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Letter Number: 518A00020585

Stacy Prather Regulatory Specialist III

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www.sunbiz.org

## **COVER LETTER**

TO:	Registration Se Division of Cor				
ci:bir		ALTY, LLC			
SUBJE	C1:	Name of Lim	ited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ndence concerning this matter	to the following:		
		MATTHEW REDMER			
		<u></u>	Name of Person	<del></del>	
		HERO REALTY, LLC			
Firm/Company					
		532 ABBOTSFORD COU	JRT		
			Address	<del></del>	
		SAINT JOHNS, FL 32259	)		
	<del> </del>				
		E-mail address: (	to be used for future annual report notifi	ecation)	
For furt	her information c	oncerning this matter, please c	all:		
MATT	HEW REDMER		904 755-0766 at ()		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclose	d is a check for th	ne following amount:			
<b>■</b> \$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)	
	MAILI	ING ADDRESS:	STREET/COURIE	ER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HERO REALTY, LLC		20
( <u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabili	ty Company were filed on 08/21/2017	and assigned
Florida document number L17000178407		SSE P
This amendment is submitted to amend the following	g:	17:33 E.F.
A. If amending name, enter the new name of the	limited liability company here:	ν. ω
WE GIVE REFERRALS, LLC		
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET AI	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or registered agent and/or the new registered office		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
<del></del>	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>	Address	Type of Action
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			□ Remove
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Page 3 of 3

Filing Fee: \$25.00