

L17000 220 844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

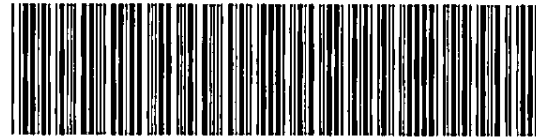
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800335471288

10/21/19--01028--028 **25.00

2019 OCT 21 PM 4:45

R. WHITE

DEC 09 2019



Adina Homes Realty, LLC

6451 North Federal Highway
Suite 105
Fort Lauderdale FL, 33308

Adina Holmes, Liaison

To whom it may concern,

I understand you may have several paperwork to process from other clients, but there are some corrections to be made to my 2 different LLC. Last time there were errors when the paperwork was filed, and it took three weeks. With that said, I appreciate very much if you could expedite the process of these paperwork, as I am planning a business trip In San Francisco on November 10, 2019 and I still need to get my company up and running with the real estate commission.

Sincerely,

Adina Holmes,

Liaison

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Adina Homes 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:

Adina Holmes

Name of Person

Adina Homes Realty LLC

Firm/Company

6451 N Federal Hwy #105

Address

Fort Lauderdale, FL 33308

City/State and Zip Code

adina@adinahomes.com

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

For further information concerning this matter, please call:

Adina Holmes

954 955-1110
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2019

ADINA HOLMES
6451 N FEDERAL HWY #105
FORT LAUDERDALE, FL 33308

SUBJECT: ADINA HOMES REALTY, LLC
Ref. Number: L17000220844

We have received your document for ADINA HOMES 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 above referenced entity has been voluntarily dissolved. Amendments cannot be filed on inactive limited liability companies.

The document must be signed by a member or an authorized representative of a member.

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) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 319A00023151

EC
11-08-2019
TA
AS

2019 DEC -6 PM 3:11

RECEIVED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Adina Homes Realty

2019 Oct 21 PM 4:45

(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 10/24/27 and assigned
Florida document number L17000220844.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6451 N Federal Hwy #105,

Fort Lauderdale FL 33308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6451 N Federal Hwy #105

Fort Lauderdale, FL 33308

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:

ADINA HOLMES

New Registered Office Address:

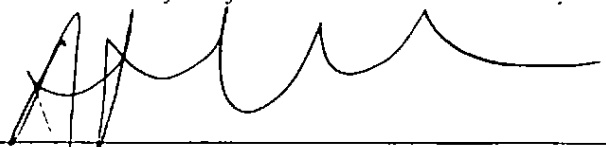
6451 N. FEDERAL HWY #105
Enter Florida street address

FORT LAUDERDALE Florida
City

33308
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>
AMBR	Adina Holmes	6451 N Federa; Hwy #105 Fort Lauderdale, FL 33308	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR			<input type="checkbox"/> Add
			<input checked="" 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

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

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

12/3/2019

Signature of a member or authorized representative of a member

ADINA HOLMES

Typed or printed name of signee