

L18000083563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

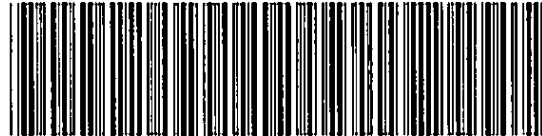
(Business Entity Name)

(Document Number)

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 19 MAY 10 AM 9:26  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

MAY 13 2019

**T SCHROEDER**

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Premiere Real Estate Professionals, 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:

Jean L. Shorts

Name of Person

Premiere Real Estate Professionals, LLC

Firm/Company

5642 White Ibis Ln.

Address

Land O'Lakes, FL 34638

City/State and Zip Code

jeannie.shorts@gmail.com

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

For further information concerning this matter, please call:

Jean L. Shorts

813

765-1717

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

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

Premiere Real Estate Professionals, 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 04/02/2018 and assigned  
Florida document number L18000083563.

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)

5642 White Ibis Ln.

Land O'Lakes, FL 34638

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

5642 White Ibis Ln.

Land O'Lakes, FL 34638

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TALLAHASSEE, FLORIDA

**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: Jeffery A Shorts

New Registered Office Address: 5642 White Ibis Ln

*Enter Florida street address*

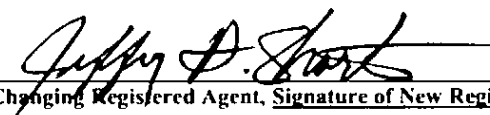
Land O'Lakes, Florida 34638

*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	Richard Mark Carlson	2654 Cypress Ridge Blvd, #103	<input type="checkbox"/> Add
		Wesley Chapel, FL 33544	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jeffery A. Shorts	5642 White Ibis Ln.	<input checked="" type="checkbox"/> Add
		Land O'Lakes, FL 34638	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA

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SECTION OF JAIL  
TALLAHASSEE, FLORIDA

(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)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

Dated 04-23. 2019

Signature of a member or authorized representative of a member

Jeffery A. Shorts  
Typed or printed name of signee