L18000087929

(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



800325838848

711 /FR - U D II: 52

03/11/19--01003--026 **25.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 25, 2019

ANDREW O'CONNELL 1922 PAMLYNNE PL WINDERMERE, FL 34786

SUBJECT: WINDERMERE REAL ESTATE AND MARKETING GROUP, LLC Ref. Number: L18000087929

We have received your document for WINDERMERE REAL ESTATE. AND MARKETING GROUP, 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):

Name unavailable, conflict document number is L10000098361.

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.

Letter Number: 519A00005861

Dionne M Scott Regulatory Specialist II

www.sunbiz.org

COVER LETTER

	Registration Se Division of Cor						
SUBJEC		re Real Estate & Marketing Gro	oup LLC				
SUBJEC	1:	Name of Lim	ited Liability Company				
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please ret	urn all correspo	ondence concerning this matter	to the following:				
		Andrew O'Connell				5213 1c.	-1
			Name of Person		`.	ز	سـ د ب
		The Social Realty LLC (no	ew company name)		. ,	-	
			Firm/Company		•	ز.	ï
		1922 Pamłynne Płace			•	7 Fr 52	
			Address		; •	~>	
		Windermere, FL 34786					
			City/State and Zip Code				
		andrewloconnell@gmail.co	ın				
		E-mail address: (to be used for future annual report notifi	ication)			
For further	er information c	concerning this matter, please c	all:				
Andrew (O'Connell		407 415-8575				
	Name o	of Person		Telephone Number			
Enclosed	is a check for the	he following amount:					
\$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Fil Certificat Certified (additional)	e of St Copy	atus &	
		ING ADDRESS:	STREET/COURIE Registration Section				

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Windermere Real Estate & Marketing Gro	•	
(Name of the Limited Liab (A Flori	oility Company as it now appears on our records.) Ida Limited Liability Company)	
The Articles of Organization for this Limited Liability		and assigned
Florida document number L18000087929	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	281
A. If amending name, enter the new name of the line. The Social Realty LLC -7 The Social The new name must be distinguishable and contain the words "L	al Realty Groud LLC =	= 77
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" or the a	bbreviation "L.L.Ç."
Enter new principal offices address, if applicable:		= in
Principal office address MUST BE A STREET ADL	DRESS)	·
		<u>. (a </u>
	:	50
Enter new mailing address, if applicable:		
Mailing <u>address MAY BE A POST OFFICE BOX)</u>		
3. If amending the registered agent and/or reg	gistered office address on our records, enter	the name of the r
egistered agent and/or the new registered office ad		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Lace I weath six Ci dan cos	
	, Florida	
	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 = M $AMBR = M$	Janager Authorized Member		
Title	<u>Name</u>	Address	Type of Action
			□ Remove
			☐ Change
			□ Remove
			Change
			□ Change
			□ Add
			□ Remove
			Add
			☐ Remove
			□ Change
			Remove
			□ Chanue

		-		
		<u> </u>		
				<u></u>
		-		
·				<u>-</u>
		·		
· —				
			•••	
				٠
				_
				
		- <u>-</u> -	<u> </u>	
			7	2
	<u> </u>			
			· · · · · · · · · · · · · · · · · · ·	
ffective date, if other than t an effective date is listed, the date i	nust be specific and cannot be prior t	o date of filing or more th	(optional) an 90 days after filing	.) Pursuant to 605.0201
ote: If the date inserted in this	block does not meet the applica Department of State's records.	ble statutory filing requ	uirements, this date	will not be listed as
e record specifies a delay The 90th day after the r	red effective date, but not ecord is filed.	an effective time,	, at 12:01 a.m.	on the earlier o
March 7th	2019			
11CG		 ·		
	1			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00