# L18000105811

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### **COVER LETTER**

	gistration Sec rision of Corp					
SUBJECT:	Whippet Rea	alty LLC				
SOBJECT.		Name of Lim	ited Liability Company			
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please returr	all correspor	ndence concerning this matter	to the following:			
		Geoffrey Pierce				
		Whippet Realty LLC	Name of Person		-	
			Finn/Company	<del></del>	-	
		16010 Wyndover Rd			2019 HAY	
		Tampa, FL 33647	Address		$\frac{1}{2}$ $\frac{1}{2}$	APPKO APPKO
		contact@whippetrealty.com	City/State and Zip Code		PH 14: 27	) /EU
For further in	nformation co	E-mail address: (	to be used for future annual report notiful.	fication)	27	
Geoffrey Pic	erce		813 501.5000 at ()			
	Name of	Person	Area Code Daytime	e Telephone Numbe	r	
Enclosed is	a check for th	e following amount:				
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &	

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

Whippet Realty LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our recorted Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liability Compa	any were filed on 5/1/2018	and assigned
Florida document number L18000105811		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		20
Principal office address MUST BE A STREET ADDRESS	2	1911AY A
		AND P
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		77
B. If amending the registered agent and/or registered	1 office address on our record	is enter the name of the r
egistered agent and/or the new registered office address		is, the hank of the I
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	888
		lorida
	Cîty	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>	Type of Action
AMBR	Nola Pierce	114 Redwood Ln N Largo, FL 33770	
			■ Remove
			Change
MGR	Erin Rogers	16010 Wyndover Rd Tampa, FL 33647	
			■ Remove
		<del> </del>	Change
			Remove
			GRemove
			□ Change
			□ Remove
			□ Change
			□ Add
			□ Remove
			□ Change

Geoffrey Pierce, AMBR, Pres							
16010 Wyndover Rd, Tampa,	FL 33647	(Change)					
Erin Rogers, Vice President	<del></del>					<del>-</del>	
16010 Wyndover Rd, Tampa,	FL 33647	(Change)				·-	<del></del> -
Nola Pierce, Secretary 114 Redwood Lane N, Largo,	FL 33770	(Change)			<u>.</u> .		
				<u> </u>			
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fective date, if other than the	data of filing	May 1, 2019		(	optional)		
n effective date, if other than the n effective date is listed, the date must tee: If the date inserted in this blocument's effective date on the December 1.	be specific and ock does not n	cannot be prior to d neet the applicable	ate of filing or n statutory filir	ore than 90 days	after filing.) Pu	rsuant to Il not be	o 605.02 : listed :
record specifies a delayed The 90th day after the reco		late, but not a	n effective	time, at 12:	01 a.m. on	the e	arlier
ted May 1	,	2019					
(7) 111		APNIS R Tember or authorize					

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Typed or printed name of signee

Filing Fee: \$25.00