## L18000127195

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	пе)
(Do	ocument Number)	-
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300352380443

09/28/20--01021--010 \*\*25.00



O SIMMONS NOV 0 4 2020

## **COVER LETTER**

## **Division of Corporations** REALSOURCE HOLDINGS LLC SUBJECT: 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: RICHARD SEIN Name of Person REALSOURCE HOLDINGS LLC Firm/Company 11632 CLAYMONT CIRCLE Address WINDERMERE, FL 34786 City/State and Zip Code rick.sein@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RICHARD SEIN 716.0459 Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ill \$25,00 Filing Fee ☐ \$30.60 Filing Fee & □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address:

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

TO:

Registration Section

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REALSOURCE HOLDINGS LLC

2020 ST 120 FW 3: 55

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Linuted Liability Company)

Florida document number L18000127195  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:
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)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of the new register agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address;
Enter Florida street address
. Florida
, Florida, 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

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 2323 St. 25 F.	3: 55 Type of Action
MGR	LUIS ORTIZ	9336 TIBET POINTE CIRCLE	
		WINDERMERE, FL 34786	
			□ Change
			□Add
			□Remove
			□Change
••••			□Add
			[]Remove
			□Change
			□Add
			□Remove
			[I]Change
		□Add	
			□Remove
			(☐Change
			□Add
			□Remove
			□ (Clause

		2.18 · 28 111 3154	
			_
			<del></del>
			_
			_
			_
			_
			_
			· <del>-</del>
<u>ite:</u> If the date inserted in th	e must be specific and cannot be prior to da	(optional) ste of filing or more than 90 days after filing.) Pursuant to 60 statutory filing requirements, this date will not be li.	05,020 sted as
ecord specifies a delayed eff is filed.	fective date, but not an effective time.	at 12:01 a.m. on the earlier of: (b) The 90th day af	ter the
9/23 ited	2020		
	11		

Typed or printed name of signed