# L18000157421

(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:  Filing for Wowaldve to  error on part of this office  Name was not available at  the time of Filing.
T. BURCH

Office Use Only

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2018 JUL 24 AM II: 02 SECRETARY OF STATE TALLAHASSEE, FL

THE JUL 24 AM II: 0

T. BURCH

# **COVER LETTER**

TO: Registration Se Division of Cor			
SUBJECT:	Name of Limited Liability Company  e enclosed Articles of Amendment and fee(s) are submitted for filing.  ease return all correspondence concerning this matter to the following:    Taling Hamis   Hamis		
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ndence concerning this matter t	o the following:	
	Jermai	Name of Person	
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		Firm/Company	
	2015 SA	XON St Address	
			2310_
	Starma E-mail address: (t	o be used for future annual report notifi	ication) com
For further information c			
J2rma Name o	ing Harris	at ( <u>\$50</u> ) 50% Area Code Daytime	Telephone Number
Enclosed is a check for the	ne 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



July 6, 2018

DIAMOND REAL ESTATE LLC 2015 SAXON ST TALLAHASSEE, FL 32310 US

SUBJECT: DIAMOND REAL ESTATE LLC

Ref. Number: L18000157421

This is to advise you that on June 28, 2018, we filed your entity under the above name, which was not available.

Therefore, we request that you file an amendment, at no charge, to change the name of your entity to make it distinguishable from the existing entity. We have enclosed forms and guidelines for your assistance.

We apologize for this inconvenience and trust that you understand the urgency in completing this amendment, and returning it along with a copy of this letter to my attention as soon as possible.

Letter Number: 118A00013997

If you have any questions, please call (850) 245-6052.

Sincerely,

Tim Burch Regulatory Specialist II Supervisor New Filing Section

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our re I Liability Company)	FE LLC
The Articles of Organization for this Limited Liability Compan Florida document number $4/8-/5742/$ .	y were filed on OG	24/2018 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia  Prople's  The new name must be distinguishable and contain the words "Limited Liab  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	land Estats	"L.I.C" or the abbreviation "L.L.C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		24 AM III: 02 ARY OF STATE HASSEEL FL
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		cords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street o	nddress
	City	_, Florida Zip Code
	v. uy	emp Cour

### 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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			☐ Change
			🗀 Add
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			☐ Change

Effective date, if other than the date of filing:  (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 605.0.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.  the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier.) The 90th day after the record is filed.  Dated  724  2018  Signature of a member or authorized representative of a member.	_		<del></del>		_
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Page 3 of 3

Filing Fee: \$25.00