## 118000218052

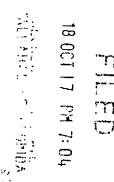
(Re	equestor's Name)	
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(8)	usiness Entity Name	e)
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## **COVER LETTER**

. Division of Cor	porations		
Michael Car SUBJECT:	twright Realty, LLC		
SUBJECT.	Name of Limi	ted Liability Company	<u>_</u>
The enclosed Articles of	Amendment and fee(s) are subr	mitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	Tommy D. Permenter, Jr., I	Esq.	
		Name of Person	
	The Permenter Law Firm, I	P.A.	
	<del></del>	Firm/Company	
	2201 S.E. 30th Avenues, St	uite 202	
		Address	
	Ocala, Florida 34471		
	tommy@permenterlaw.com	City/State and Zip Code	
	E-mail address: (t	o be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	ti:	
Tommy D. Permenter, Jr.	, Esq.	352 622-1811	
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	<del>-</del>		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

**Registration Section** 

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

Michael Cartwright Realty, LLC		
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our record da Limited Liability Company)	is.)
The Articles of Organization for this Limited Liability (Florida document number L18000218052	Company were filed on September 13, 20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
Michael Cartwright, LLC		
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		00
(Principal office address MUST BE A STREET ADD	RESS)	7
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		78 7: Q4
B. If amending the registered agent and/or registered agent and/or the new registered office add	istered office address on our record dress here:	s, enter the name of the new
Name of New Registered Agent:		<del> </del>
New Registered Office Address:	Enter Florida strect addre	5.5
	, FI	orida
	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 = N $AMBR = A$	Aanager Authorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			□ Remove
			□ Change
		<del></del>	□ Remove
	• • • • • • • • • • • • • • • • • • • •		Remove
		-	□ Change
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			☐ Change

Effective date, if other than the date of filing:  (optional)  (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 60 Note:  (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list document's effective date on the Department of State's records.  The 90th day after the record is filed.  (Dated October 13 to 2018)		
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	ated October 13th 2018	
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00