

L18 000 253 975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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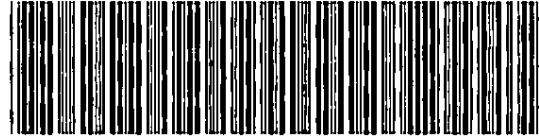
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: R1 Florida, LLC

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:

Edward M Taylor

Name of Person

R1 Florida, LLC

Firm/Company

9674 Eagle Ranch Road Suite 3

Address

Albuquerque New Mexico 87114

City/State and Zip Code

accounting@r1companies.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward M Taylor

Name of Person

at (505)

Area Code

227-0863

Daytime Telephone Number

Enclosed is a check for the 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 Address:

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**

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

The Articles of Organization for this Limited Liability Company were filed on 10/29/2018 and assigned
Florida document number L18000253975.

This amendment is submitted to amend the following:

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 "LLC."

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 registered agent and/or the new registered office address here:

Name of New Registered Agent:

Jeffrey Lang

New Registered Office Address:

618 E South St Suite 500

Enter Florida street address

Orlando

City

Florida 32801

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.

DocuSigned by:



If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FL

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>	<u>Type of Action</u>
MGR	Glickman, Jeffrey	13750 W COLONIAL DR 350-311	<input type="checkbox"/> Add
		Winter Garden, FL 34787	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LANG, JEFFREY	618 E South St Suite 500	<input checked="" type="checkbox"/> Add
		Orlando, FL 32801	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. Effective date, if other than the date of filing: _____ (optional)

(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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 8/31/2022

Edward M Taylor

Signature of a member or authorized representative of a member

Edward M Taylor

Typed or printed name of signee

**State of Florida
Department of Business and Professional Regulation
Florida Real Estate Commission
Broker (BK) Transactions
Form # DBPR RE 13**

TRANSACTION CHECKLIST - IMPORTANT - Submit all items on the checklist below with your form to ensure faster processing.

ALL License Applicants must submit:

- ☐ Section V Affirmation By Written Declaration
- ☐ Completed application

Broker Request for Multiple License Applicants must submit:

- ☐ Fee in the amount of \$77.00 for each multiple license requested, payable to DBPR

Add Broker to Real Estate Company Applicants:

- ☐ No fee is assessed for this transaction

Please mail your completed form, documentation and required fee(s) to:

Department of Business and Professional Regulation
2601 Blair Stone Road
Tallahassee, FL 32399-0783

State of Florida
Department of Business and Professional Regulation
Florida Real Estate Commission
Broker (BK) Transactions
Form # DBPR RE 13

Check the box for the relevant transaction in Section I and complete the applicable additional section(s) only. Leave the sections that are not relevant to your desired transaction blank. If you have any questions or need assistance in completing this form, please contact the Department of Business and Professional Regulation, Customer Contact Center, at 850.487.1395.

For additional information see instructions at the end of this form.

Section I – Transaction Types

CHECK ONLY ONE OF THE TRANSACTION TYPES (Use multiple forms if more than one transaction is applicable)	
<input checked="" type="checkbox"/>	Qualify a Real Estate Company [2502/9008]. Complete Sections II and V. <ul style="list-style-type: none"> • Become Active from Inactive Status • Transfer/Change of Employer • Upgrade from Broker Sales Associate to Broker (BL to BK)
<input type="checkbox"/>	Broker Request for Multiple Licenses [2501/1050] - Fee \$77. Complete Sections II and V.
<input type="checkbox"/>	Become Inactive [2501/4020] Complete Sections II and V.
<input type="checkbox"/>	Become Active- Qualify a Sole Proprietorship [2501/9009] Complete Sections III and V.
<input type="checkbox"/>	Downgrade from Broker to Broker Sales Associate [2501/4040] Complete Sections IV and V.

Section II – Broker and Company Information

Last/Surname (Broker)	First	Middle	Suffix
Lang	Jeffrey		
Broker License Number: BK3551012			
Primary Phone Number	Primary E-Mail Address		
505-363-6503	specialfiguy@gmail.com		
REAL ESTATE COMPANY INFORMATION			
Name of real estate company/ sole proprietorship: R1 Florida, LLC			
License number of real estate company/ sole proprietorship: CQ1061291			

Section III – Become Active – Qualify Sole Proprietorship – Broker (BK)


Last/Surname (Broker)	First	Middle	Suffix
Broker License Number			
Primary Phone Number	Primary E-Mail Address		
Name of Sole Proprietorship or Doing Business As (D/B/A)/Trade Name (if applicable):			
Signature of new qualifying broker:			
BUSINESS LOCATION ADDRESS			
Street Address			
City	State	Zip Code (+4 Optional)	
County (if Florida address)	Country		



Section IV – Change from Broker (BK) to Broker Sales Associate (BL)

Last/Surname (of broker changing from BK to BL) First			Middle	Suffix
License number (of broker changing from BK to BL):				
Primary Phone Number		Primary E-Mail Address		
EMPLOYER INFORMATION				
If BL will be employed by a sole proprietor, provide Broker's name:				
If BL will be employed by a sole proprietor, provide Broker license number:				
If BL will be employed by a real estate company, provide the company name:				
If BL will be employed by a real estate company, provide the company license number:				
Signature of qualifying broker:				

Section V – Affirmation By Written Declaration

AFFIRMATION BY WRITTEN DECLARATION	
<p>I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.</p>	
Signature  Jeffrey Lang	Date: 9/1/2022
Print Name:	

Instructions and Additional Information

If you have any questions or need assistance in completing this form, please contact the Department of Business and Professional Regulation, Customer Contact Center, at 850.487.1395.

1. Application Instructions (by section)**a. Section I - Transaction Types**

- i. Check only one of the transactions listed.
- ii. Qualify a real estate company:
 - (1) **Become active from inactive status-** select this transaction if you wish to change your status from an inactive broker to an active broker.
 - (2) **Transfer/change employer-** select this transaction if you wish to transfer or change from one employer to another.
 - (3) **Upgrade from broker sales associate to broker-** select this transaction if you wish to upgrade your broker sales associate license to a broker license.
- iii. **Broker request for multiple licenses-** select this transaction if you are currently a sole proprietor broker or a qualifying broker of a company and wish to remain in that capacity and be active with another company.
 - (1) A broker can only qualify one real estate company at a time with a single license. However, brokers can apply for multiples licenses. Brokers will need to apply for a "multiple license" for each additional business they wish to qualify.
 - (2) Applicants must submit a \$77 fee for each multiple license requested.
- iv. **Become inactive-** select this transaction if you wish to have an inactive license.
- v. **Become active-qualify a sole proprietorship-** select this transaction if you wish to become an active broker by qualifying a sole proprietorship.
- vi. **Downgrade from broker to broker sales associate-** select this transaction is you wish to change your license from a broker to a broker sales associate.

b. Section II – Broker and Company Information

- i. This section is to be used by the following:
 - (1) Applicants wishing to qualify a real estate company by becoming active, by transfer/change of employer, or upgrade from broker sales associate to broker.
 - (2) Applicants requesting multiple licenses.
 - (3) Applicants wishing to become inactive.
- ii. Provide your name as it appears on your real estate license.
- iii. Provide your broker license number (BK).
- iv. Provide a valid phone number and email address. Contact information is often used to quickly resolve questions with applications by telephone call or email. If contact information is not provided, questions regarding applications will be mailed to the applicant's mailing address and may take longer to resolve.
- v. Provide the name of the real estate company pertaining to your transaction as it is registered with the Florida Department of State, Division of Corporations www.sunbiz.org.
- vi. Enter the license number of the real estate company (if known).
- vii. **Note to Multiple Broker Licensees requesting inactive status:** Ending the relationship of one of your multiple licenses by becoming inactive will result in that license being cancelled/voided.
- viii. **Note to applicants wishing to qualify a real estate company:** Applicants wishing to qualify a real estate company as a broker must be registered as an officer (Inc/Corp), member or manager (LLC/LLP) of the real estate company prior to applying to become a qualifying broker of a real estate company.
- ix. **Note:** The broker must sign and date the Affirmation by Written Declaration (Section V of this application).

c. Section III – Become Active- Qualify a Sole Proprietorship

- i. Provide your name as it appears on your real estate license.
- ii. Provide your broker license number (BK).
- iii. Provide a valid phone number and email address. Contact information is often used to quickly resolve questions with applications by telephone call or email. If contact information is not provided, questions regarding applications will be mailed to the applicant's mailing address and may take longer to resolve.
- iv. Provide the name of the real estate company to be qualified as it is registered with the Florida Department of State, Division of Corporations.
- v. Provide the business location address for the real estate company you will operate as a sole proprietor. This must be a physical location and cannot be a post office box address.

- vi. **Note:** The broker must sign and date the Affirmation by Written Declaration (Section V of this application).
- d. **Section IV – Change from Broker (BK) to Broker Sales Associate (BL)**
 - i. Provide your name as it appears on your real estate license.
 - ii. Provide your broker license number (BK).
 - iii. Provide a valid phone number and email address. Contact information is often used to quickly resolve questions with applications by telephone call or email. If contact information is not provided, questions regarding applications will be mailed to the applicant's mailing address and may take longer to resolve.
 - iv. Provide employer information.
 - (1) If you will be employed by a sole proprietor, please provide the sole proprietor broker's name and license number and have the sole proprietor broker sign as the qualifying broker at the bottom of Section IV.
 - (2) If you will be employed by a real estate company, please provide the name and license number of the real estate company and have a qualifying broker for the company sign the bottom of Section IV.
- e. **Section V - Affirmation by Written Declaration**
 - i. Broker must sign the affirmation by written declaration.