## 118000 277591

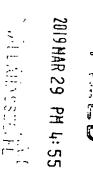
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of S	tatus
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C. GOLDEN APR - 6 2019

## **COVER LETTER**

TO: Registration S Division of Co			
Great So	uthern Real Estate		
SUBJECT:		ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are subn	nitted for filing.	
Please return all corresp	ondence concerning this matter t	o the following:	
	Brenda Mclean		
		Name of Person	
	Great Southern Real Estate	uc	
	<del></del>	Firm/Company	
	981 Hwy 98 E, suite 3-256		
	<del></del>	Address	<del> </del>
	Destin, FI 32541		
	Brenda@bmclean.net	City/State and Zip Code	
	E-mail address: (to	o be used for future annual report notifi-	cation)
For further information	concerning this matter, please ca	11:	
Brenda Mclean		251 5541657	
Name	of Person	at ()	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:

TO:

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

EILED

2019 MAR 29 PM 4:55

Great Southern Real Estate LLC	<sup>2</sup>	
(Name of the Limi	(A Florida Limited Liability Company)	12 × 305, FI
The Articles of Organization for this Limited L Florida document number L18000277591	Liability Company were filed on 12-03-2018	and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company here:	
he 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 appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
3. If amending the registered agent and registered agent and/or the new registered of	Vor registered office address on our records, ente	r the name of the ne
Name of New Registered Agent:	Justin Davis	
New Registered Office Address:	4320 Commons DRive WEst #1214	
	Enter Florida street address	

## 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.

City

Destin

If Changing Registered Agent, Signature of New Registered Agent

. Florida <u>32541</u>

If algending 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	Type of Action
mgr	Brenda Mclean	Destin Fl 32541  Add  Remove  Change	
			☐ Change
mgr	Justin Davis		
			■ Remove
			☐ Change
			Remove
			☐ Change
<del></del>			Add
			☐ Remove
			Change
<del></del>			□ Add
			□ Remove
			□ Change
			Change

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(If an effective date Note: If the da	c, if other than the date of filing:	505.0 istec
	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the eaday after the record is filed.	rlie
03-26-2 Dated	2019	
	Manda Mana	
	Signature of a member or authorized representative of a member	

Page 3 of 3

Filing Fee: \$25.00