

L19000033169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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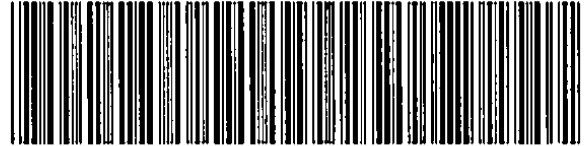
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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♦ LICENSED IN MICHIGAN
◀ LICENSED IN NEW HAMPSHIRE
■ LICENSED IN NEW JERSEY
● LICENSED IN NEW YORK
▲ LICENSED IN PENNSYLVANIA

February 22, 2019

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: The Collection Realty, LLC
Articles of Amendment to Organization**

To Whom It May Concern:

Our office represents The Collection Realty, LLC. Please see enclosed the original Articles of Amendment along with a check for the filing fee of \$25.00.

Please file at your earliest convenience. We thank you in advance for your attention and assistance. If you have any questions, please do not hesitate to contact us.

Sincerely,

Jennifer L. Coddington

jcoddington@masseylawgroup.com

For the Firm

Encs.

MASSEY LAW GROUP, P.A.
WWW.MASSEYLAWGROUP.COM

4401 W. KENNEDY BLVD., SUITE 201
TAMPA, FL 33609-2521
TELEPHONE: 866-225-3654

110 SE 6TH. STREET, SUITE 1736
FORT LAUDERDALE, FL 33301
TELEPHONE: 954-780-8251

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: The Collection Realty, 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:

Jonathan B. Lewis, Esq.

Name of Person

Massey Law Group, P.A.

Firm/Company

4401 W Kennedy Blvd. Suite 201

Address

Tampa, FL 33609

City/State and Zip Code

smassey@masseylawgrouppa.com

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

For further information concerning this matter, please call:

Jonathan B. Lewis

954

780-8251

at (_____) _____

Name of Person

Area Code

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

The Collection Realty, LLC

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

SECRETARY OF STATE
February 11, 2019
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned Florida document number L19000033169.

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 "L.L.C."

Enter new principal offices address, if applicable:

501 E Las Olas Blvd, Fort Lauderdale, FL 33301

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

501 E Las Olas Blvd, Fort Lauderdale, FL 33301

(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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	ELLEN TARACIDO, PA	1412 NE 16th Ter, Fort Lauderdale, FL 33304	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ELLEN TARACIDO	15291 SW 15th Place Davie, FL 33326	<input type="checkbox"/> Add
			<input checked="" 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"/> Change

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(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),

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.

Handwritten Signature
Signature of a member or authorized representative of a member

Typed or printed name of signee