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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filina Officer:	

Office Use Only



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2019 ATT 28 PH 6: 14

C. GOLDEN SEP - 9 2019

## **COVER LETTER**

TO: 1	Registration Se Division of Cor	ection Porations		*
SUBJEC	C4 Realty (	Group LLC		
SOBJEC		Name of Lim	ited Liability Company	<del></del>
The enclo	osed Articles of	. Amendment and fee(s) are sub	mitted for filing.	
Please ret	turn all correspo	endence concerning this matter	to the following:	
		Lewis J. Collins IV		
			Name of Person	
		10411 Pine Hill Ter	Firm/Company	
		Pensacola, FL 32514	Address	
			City/State and Zip Code	
		E-mail address: (	to be used for future annual report notif	ication)
For furthe	er information c	oncerning this matter, please ca	all:	
Lewis J.	Collins IV		850 748-1393 at ( )	
	Name o	f Person		Telephone Number
Enclosed	is a check for th	ne following amount:		
\$25.0	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)

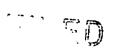
MAILING ADDRESS:

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**



C4 REALTY GROUP LLC

201971928 PM 6:1

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

\	ince Emering Company,		
The Articles of Organization for this Limited Liability Comp	any were filed on $\frac{3/07}{1}$	7/2019	and assigned
lorida document number L19000066257	,		
This amendment is submitted to amend the following:			
ins amendment is submitted to amend the following.			
A. If amending name, enter the new name of the limited	liability company her	<u>:e</u> :	
LEWIS J. COLLINS IV, LLC			
he new name must be distinguishable and contain the words "Limited L	iability Company," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS	<u> </u>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
	***		
	<del></del>		
3. If amending the registered agent and/or registered		our records, ente	r the name of the
egistered agent and/or the new registered office address	<u>here</u> :		
Name of New Registered Agent:			
New Registered Office Address:			
The region of the region.	Enter Flori	da street address	
		Florida	
	City	,	Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:		
hereby accept the appointment as registered agent and	aaraa to act in this c	anacity I fierther a	aree to comply with
provisions of all statutes relative to the proper and compl	0		
accept the obligations of my position as registered agent			•

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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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an effective date is listed, the date must bote: If the date inserted in this bloc	e specific and cannot be k does not meet the ap	prior to date of filing opplicable statutory t	or more than 90 days a Tling requirements,	fter filing.) Pursuant to 605.0 this date will not be lister
ocument's effective date on the Dep	artment of State's rece	ords.		
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Filing Fee: \$25.00