

L19000150329

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

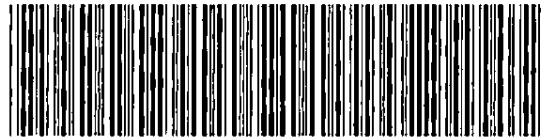
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



100416576681

10/05/23--01014--002 **25.00

FILED
2023 NOV 17 AM 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

1 2

**TO: Registration Section
Division of Corporations**

SUBJECT: SWAN CITY TITLE COMPANY, 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:

SCOTT KONTNY
Name of Person
SWAN CITY TITLE COMPANY LLC
Firm/Company
740 S FLA AVENUE
Address
LAKELAND, FL 33803
City/State and Zip Code
SCOTT@SWANCITYTITLECO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SCOTT ERIC KONTNY	863	409-4560
_____	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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2023

SCOTT KONTRY
SWAN CITY TITLE COMPANY LLC
740 S FLA AVE
LAKELAND, FL 33803

SUBJECT: SWAN CITY TITLE COMPANY LLC
Ref. Number: L19000150329

We have received your document for SWAN CITY TITLE COMPANY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Valerie Herring
Regulatory Specialist III
Internet Support

Letter Number: 623A00024129

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

SWAN CITY TITLE COMPANY, LLC

(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 06/06/2019 and assigned
Florida document number L19000150329.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
2023 NOV 17 AM 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>
MGR	RYAN SMITH	7140 S CARTER ROAD,	<input type="checkbox"/> Add
		LAKELAND, FL 33813	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
mGR MR	SCOTT ERIC KONTNY	1258 SCOTTSLAND DR,	<input type="checkbox"/> Add
		LAKELAND, FL 33813	<input type="checkbox"/> Remove
		50%	<input checked="" type="checkbox"/> Change
mGR	Crystal R Goffe	740 SFLA AVENUE	<input type="checkbox"/> Add
		Lakeland, FL 33801	<input type="checkbox"/> Remove
		50 %	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Ryan Smith has been removed from
Swan City Title Company LLC.

Scott Kontny and Crystel Goffe are
now 50% owners each

2023 NOV 17 AM 10:57
SECRETARY OF STATE
TALLAHASSEE, FL 32310

FILED

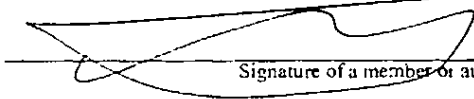
E. Effective date, if other than the date of filing: _____ (optional)

(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 OCTOBER 3RD, 2023



Signature of a member or authorized representative of a member

SCOTT ERIC KONTRY

Typed or printed name of signer

Filing Fee: \$25.00