## 119000156345

(Requ	uestor's Name)	
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SLUKULARA TALLAHASSELTEL



## **COVER LETTER**

TO:	Registration Se Division of Cor				
		omes Realty, LLC			
SUBJE	CT:	Name of Lim	ited Liability Company		
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	to the following:		
		Niki Schnyder			
		Norfleet Homes Realty	Name of Person	,,	_
		1423 SW 166 STREET	Firm/Company		_
		Newberry, FL 32669	Address		_
		niki@norfleethomes com	City/State and Zip Code		_
For furt	her information c	encerning this matter, please concerning	to be used for future annual repail:	ort nonneation)	
Niki So	chnyder		352 4944 at ()		
•	Name o	of Person	Area Code	Daytime Telephone Numb	H.I.
Enclose	ed is a check for t	he following amount:			
<b>■</b> \$25	5,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclos	ed) Certific	Filing Fee, cate of Status & ed Copy nat copy is enclosed)
	MAIL	ANG ADDRESS:	STREET/O	COURIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nomeet Homes Realty, LLC				
( <u>Name of the Lim</u>	ted Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited L	iability Company were filed on 6/1	y were filed on 6/13/2019		
Florida document number L19000156345	<del> </del>			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability company he	<u>ere</u> :		
The new name must be distinguishable and contain the	words "Limited Liability Company," the d	lesignation "LLC" or the abb	reviation "L.L	C."
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)		<b>2019</b> کادر	
			) ( )	<del></del>
		<u>:</u>	AUG 3	1 (
Enter new mailing address, if applicable:				- Marine
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	ľ	<u> </u>	2 8 5
			တ္	ار <sub>دی</sub> ن 
		•		
B. If amending the registered agent and registered agent and/or the new registered of		i our records, <u>enter t</u>	<u>he name o</u>	<u>if the ni</u>
Name of New Registered Agent:	Kristie Norfleet			
New Registered Office Address:				
	Enter Flor	rida 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.

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>	Address	Type of Action
MGR	Lowell Chesborough		<b>=</b> Add
			Remove
			☐ Change
MGR	NORFLEET, EDWARD D, III		
			<b>≡</b> Remove
			☐ Change
			□ Remove
		1	□ Change
			Change
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f an effecti <u>Note:</u> If t	date, if other the we date is listed, the the date inserted in a effective date o	date must be specific this block does r	c and cannot be not meet the ap	iplicable statutor	ng or more than <sup>9</sup> ry filing require	(optional) O days after filing ments, this date	;) Pursuant to 605.0
e recor The 90	d specifies a d Ith day after th	elayed effectiv ne record is fil	ve date, but ed.	not an effec	tive time, at	: 12:01 a.m.	on the earlier
8/2 Dated	9/19		,				
		12 1	11.	<del></del>			
	Z	J. Ruff	let_	111			<del></del>
		Signature	of a member or	authorized represe	entative of a men	nber	
	EDWARD D, N	u	/ /	$\Omega  \mathcal{V} / \mathcal{L}$	11/1	177	

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Filing Fee: \$25.00