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Office Use Only



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MAY 19 2020

COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Se Division of Cor				·
MJF REAL SUBJECT:	ESTATE GROUP LLC	ī	<i>70</i>	
Subject.	Name of Lim	ited Liability Company		The second second
	Amendment and fec(s) are sub	_		
	JANICE FANSTILL			
		Name of Person		
	MJF REAL ESTATE GRO			
		Firm/Company		
	3355 OSPREY LN			
		Address		
	PORT CHARLOTTE, FL			
	JFANSTILL@COMCAST.			
		to be used for future annual report notif	ication)	
For further information c	oncerning this matter, please ea	ill:		
JANICE FANSTILL		941 380-0341 at ()		
Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration S Division of C	Section	Street Address: Registration Sec Division of Corp		

Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	TO	
ARTICLES	OF ORGANIZATION	٠, ١
	OF	4
MJF REAL ESTATE GROUP LLC		
(Name of the Limited Liability (A Florida I	Company as it now appears on our record Limited Liability Company)	(A) TAY
The Articles of Organization for this Limited Liability Co	ompany were filed on 3/182020	and assigned
Florida document number L19000216218	_,	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed 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 ADDRI	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		<u> </u>
	Enter Florida street addres	NS .
	FI	orida
	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>	Address	Type of Action
AR	MARK FANSTILL	3355 OSPREY LN	□Add
		PORT CHARLOTTE, FL. 33953	≡ Remove
			☐ Change
			□Add
			□Remove
			□Add
			□Remove
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ective date, if other than the date offective date is listed, the date must be seen 16th.	pecific and cannot be prior	to date of filing or more th	nan 90 days after tiling.) Purs	uant to 605,0207
te: If the date inserted in this block of the countries of the Depart			juirements, this date will t	iot be fisted as
cord specifies a delayed effective dat	e, but not an effective tir	me, at 12:01 a.m. on th	c earlier of: (b) The 90th	n day after the
s filed.				•
. DOM: 40				
aPRIL 29	2020	<u> </u>		
acd APRIL 29	: 2020			
Jan 20		-		
(d	2020	orized representative of a	member	

Filing Fee: \$25.00