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TALLAHASSES, FL

Pagny Carlo

COVER LETTER

Div	ision of Cor	porations		
SUBJECT:		AL ESTATE SALES I.LC		
0000,01		Name of Lim	ited Liability Company	
The enclosed	Articles of	Amendment and tee(s) are sub	mitted for filing.	
Please return	all correspo	indence concerning this matter	to the following:	
		Adam A. Czayn, Esq.		
			Name of Person	
		Keith Taylor Law Group, I	Р.Л.	
			Firm/Company	····
		P.O. Box 2016		
			Address	
		Lecanto, FL 34460		
			City/State and Zip Code	
		joecmeek@gmail.com		
		E-mail address: (to be used for future annual report notifi	cation)
For further in	nformation e	oncerning this matter, please ca	all:	
Adam A. Cz	aya		352 795-0404	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e following amount:		
≅ \$25.00 F	iling 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)
	34447	INC ADDRESS.	PTIMETIC	·n . opugge

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

TO:

Registration Section

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

MEEK REAL ESTATE SALES LLC

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

(AF	lorida Limited Liability Company)	<u> </u>
The Articles of Organization for this Limited Liabili	ity Company were filed on 9/3/2019	and assigned
Florida document number L19000216717	<u></u>] [
This amendment is submitted to amend the following	ng:	
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 "L	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	[]
(Principal office address MUST BE A STREET A		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	110 AT
B. If amending the registered agent and/or r registered agent and/or the new registered office:	registered office address on our recon	rds, enter the name of the do
	additys nere.	
Name of New Registered Agent:		<u>- သ</u>
New Registered Office Address:		
	Enter Florida street add	Ires
		Florida
	Cny	Zip Code
New Registered Agent's Signature, if changing Regist	tered Agent:	
I hereby accept the appointment as registered ago provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change.	nd complete performance of my duties, ad agent as provided for in Chapter 602 stered office address. I hereby confirm t	and I am familiar with and 5. F.S. Or. if this document is
	If Changing Registered Agent, Signatur	c of New Registered Agent
	Page 1 of 3	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being a or removed from our records:

MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Joseph Meek Jr.	PO BOX 640507	
		BEVERLY HILLS, FL 34464	B Add
			Remove
			☐ Change
AMBR	Amy B. Meek	PO BOX 640507	
		BEVERLY HILLS, FL 34464	
			🗏 Remove
			Change
			□ Add
		☐ Remove	
			□ Change
			☐ Remove
			Change
			□ Add
			☐ Remove
			☐ Change
			Add

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an effec <u>lote:</u> H	e date, if other than the date of filing:
ine 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie Oth day after the record is filed.
ited _	5. ph.mbc R 26. 2019.
	Sophen here 26, 2019. Joseph P. Meek III Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00