## L19000738105

(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:





000344863080

05/26/20-+01033-+001 \*\*25.00

2020 (C.) 26 AN II: 46

Amend

JUII 15 TOTO I ALBRITTON

## **COVER LETTER**

TO:	Registration Division of C	Section Corporations					
SUBJ	ЕСТ: <u>L</u> a	akewood	Ranch Name	Real of Limited	Estate Group I Liability Company	<u>u</u> c	
The er	nclosed Articles	of Amendme	nt and fee(s) a	re submi	tted for filing.		
Please	return all corre	spondence cor	ncerning this r	natter to	the following:		
			Ka	ithy?	Zui dema Name of Person		. <u>.                                   </u>
			Keller	Willi	ams Realty S Firm/Company	elect	
		ı	8210 L	akewe	ood Ranch B	olud	
		·····					
			akewou	d Ra	nch FL 3 City/State and Zip Code	4202	
					City/State and Zip Code		
For fu	rther information	on concerning	this matter, pl	ease call:			
	Kathy	Zuide	ma		at (941) 7.	20-258	(celi)
	Nan	ne of Person			Area Code	Daytime Telepho	ne Number
Enclos	sed is a check fo	or the followin	g amount:				
X 52	25.00 Filing Fee		00 Filing Fee rtificate of Sta		S55.00 Filing Fee & Certified Copy (additional copy is enclosed)		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Add	lress:			Street Ado	dr <u>ess:</u>	

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

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	l Estate Group LLC
( <u>Name of the Limited Liability</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number <u>L 19000238105</u>	Company were filed on $\frac{9/30/19}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ited liability company here:
The new name must be distinguishable and contain the words "Lim	nited 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 ADDR	RESS)
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	1.1.
	<del></del>
B. If amending the registered agent and/or registered	d 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>	Address	Type of Action
AMBR	Steve Burcon	330 Gershwin Dr.	XAdd
		Sarasota FL 34237	Remove
			Change
AMBR	Scott Nold	6508 Rosehill Farm Run	XAdd
		Lakewood Ranch FC 34211	□ Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
			🗆 Remove
			□Change
			□Add
			□ Remove
			Change
			□ Add
			🗆 Remove
			□Change

	<del></del>
Note	tive date, if other than the date of filing:
he reco	ord 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 filed.
Dated	Signature of a member or authorized representative of a member
	Signature of a memorial

Filing Fee: \$25.00