## 119000272660

(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:				

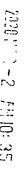
Office Use Only



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R. WHITE



## **COVER LETTER**

TO:	Registration S Division of Co						
SUBJE		con Realtor, LLC	·				
Name of Limited Liability Company							
		f Amendment and fee(s) are sub condence concerning this matter					
		James Falcon					
Name of Person							
		James Falcon, LLC					
			Firm/Company				
		833 S Willow Ave					
		Address					
		Tampa, FL 33606					
		City/State and Zip Code					
		jafalcon@gmail.com					
	E-mail address: (to be used for future annual report notification)						
For furt	her information	concerning this matter, please c	all:				
James F	alcon		813 777-6823				
	Name	of Person		ne Telephone Number			
Enclose	d is a check for	the following amount:					
■ \$25	.00 Filing Fee	S30.00 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 Addr	ess:	Street Address:				

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

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



January 17, 2020

JAMES FALCON 833 S WILLOW AVE TAMPA, FL 33606

SUBJECT: JAMES FALCON REALTOR, LLC

Ref. Number: L19000272660

We have received your document for JAMES FALCON REALTOR, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

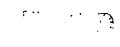
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 820A00001409

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2020 HIR -2 FH 10: 34

James Falcon Realtor, LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now annears on our record ability Company)	<b>P</b> )
The Articles of Organization for this Limited Liability Company w Florida document number L19000272660	vere filed on 10/31/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	n gr
James Falcon, LLC		
The new name must be distinguishable and contain the words "Limited Liabilit	y 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)		
Matting and ess carries and		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	ddress on our records, <u>enter</u>	r the name of the new registered
New Registered Office Address:	Enter Florida street addre	as .
	, F	lorida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	perjormance of my auties, o provided for in Chapter 605	F.S. Or, if this document is

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

AMBR = Authorized Member				
<u>Title</u>	Name	Address	Type of Action	
			□Add	
			□Remove	
			Change	
			DAdd	
			Remove	
			Change	
			□ Add	
			□Remove	
			Change	
			🗆 Add	
			□ Remove	
			Change	
			□ Add	
			□ Remove	
			Change	
			□Remove	
			Change	

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	<del></del>
E. Effective date, if other than the date of filing:  (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 6  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lidedocument's effective date on the Department of State's records.	05.0207 (3)(b) sted as the
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 at	fter the
record is filed.	
Dated,	
Signature of a member or authorized representative of a member	
James Falcon Typed or printed name of signee	

Filing Fee: \$25.00