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COVER LETTER

Tallahassee, FL 32314

TO:	Registration Sec Division of Corp		•	ě
SUBJE	ct: SWE	Real Estate Name of Limi	Management Little Liability Company	LLC
The end	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	eturn all correspor	idence concerning this matter	to the following:	
		Autumn S	COTT Name of Person	
		SWFLR	<u>eal Estate Man</u> Firm-Company	agement LLC
		4111 4th	Ave	
		Beaver	Falls PA 15010 City/State and Zip Code	2
		<u> </u>	@ 2mforrent.com to be used for future annual report notif	ication)
For fur	ther information co	neerning this matter, please ea	all:	
	A ut Name of	umn Scott Person	at (724) 846-79 Area Code Daytime	Telephone Number
Enclose	ed is a check for the	e following amount:		
V S2:	5.00 Filing 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)
	Mailing Address Registration S Division of Co P.O. Box 632	ection orporations	<u>Street Address:</u> Registration Sec Division of Corp The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SWFL Real Estate Management LLC

(A)	Florida Limited Lial	bility Company)	<u> </u>	
The Articles of Organization for this Limited Liab		ere filed on	912020	and assigned
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liabilit	ty company here:		
The new name must be distinguishable and contain the wor	ds "Limited Liability	Company," the designati	on "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applical	ole:			. Ka
(Principal office address MUST BE A STREET	ADDRESS)			
		-		·
Enter new mailing address, if applicable:				. Р .
(Mailing address MAY BE A POST OFFICE B	<u>ox)</u>			
B. If amending the registered agent and/or regagent and/or the new registered office address Name of New Registered Agent: New Registered Office Address:	<u>here:</u> <u>Jennifer</u>	· Dinardi ouette Circle	e AD+.3	e of the new registered
		Enter Florida stre	et addrèss , Florida	33907 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
MGR	Rodney Henson	3824 Cedar Springs Rd	Add
		#801-5895	Remove
		Dallas, TX 75219	Change
ANBR	Rodney Henson	3824 Cedar Springs Ro	_ □Add
	·	110	∐Remove
		Dallas, TX 75219	IChange
			Add
			URemove
			☐ = Change
			PH
			ეე — ე√თქ
			□ Remove
			Change
			U Add
			El Remove
			carrenieve
			TChange
			
			□Remove

	
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	<u> </u>
fective date, if other than the date of filing:	(optional)
in effective date is listed, the date must be specific and cannot be prior to date of filing or note: If the date inserted in this block does not meet the applicable statutory filir	
seument's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. is filed.	on the earlier of: (b) The 90th day after t
^	
ned <u>August II</u> , <u>2021</u> .	
Signature of a member or authorized representative	

Filing Fee: \$25.00