## L20000305004

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Office Use Only



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01/28/25--01020--023 \*\*43.75





February 28, 2025

RACHEL TULLIER 1133 WILKINS ST MOBILE, AL 33608

SUBJECT: REZULTS REAL ESTATE-FLORIDA LLC

Ref. Number: L20000305004

We have received your document for REZULTS REAL ESTATE-FLORIDA LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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.

SHANTELL BROWN Regulatory Specialist II

Letter Number: 125A00004482



## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: Refults Real Estate - Florida UC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Rachel Juliev Name of Person	
Regults Real Estate-Florida LLC	
574 Azaka Rd Ste. 111	20 S
Mobile AL 34609  City/State and Zip Code	2025 MAR 2 SECRETAI
City/State and Zip Code  Vache Hulier & gmail. Com  E-mail address: (to be used for future annual report notification)	多で発 21 PH
For further information concerning this matter, please call:	<u>ادن</u> چي
Rachel Tullier at (225) 278-7595 Area Code Daytime Telephone Number	30
Enclosed is a cheek for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee SCertificate of Status Certified Copy (additional copy is enclosed)  S60.00 Filing I S60.00 Filing I Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	Status & y
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compar (A Florida Limited L	State - Floxida LLC  ny as it now appears on our records.)  Liability Company)	_
The Articles of Organization for this Limited Liability Company Florida document number <u>L200030500</u> 4	were filed on $9/28/2020$ and	assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil the new name must be distinguishable and contain the words "Limited Liabil	18 Coast LLC	1 "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	574 Azaka Rd Ste. III. Mobile AL 36609	2002 2002 2002 2002 2002 2002 2002 200
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	では、1 1017 1217 1217 1217 1217 1217 1217 121	new registered
Name of New Registered Agent:	1:1	<del></del>
New Registered Office Address:	Enter Florida street address	
	, FloridaZip C	ode

## 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 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

Title	Name	Address 123 Buratera D	Type of Action
AMBR	Denise McMichael-Wiser	123 Buratara Dr 1411 Chickasawi AL 36611	
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			⊡Remove
			□Change
			🗆 Add
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<del></del>			□Add
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			□Change
			□Remove
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			□Change

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If an effe Note: I	re date, if other than the date of filing: //23/2025 (optional) relive 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 605.020 fithe date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as not's effective date on the Department of State's records.
e record	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 d.
Dated _	3/14 2025
	Signature of a member of authorized representative of a member
	Signature of a member or authorized representative of a member
	b = b + b + b + b + b + b + b + b + b +

Filing Fee: \$25.00