120000356861

(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:
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Office Use Only



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MAY - 4 2022

D CUSHING

COVER LETTER

TO: Registration : Division of Co			
	k Realtor LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Steven Brydges		
		Name of Person	
	Steven Brydges, CPA		
	 	Firm/Company	
	35 Knight Boxx Rd Suite	4	2022 APR -7
		Address	AR
	Orange Park, Florida 3200	55	-7
		City/State and Zip Code	
	Steve@dbcpa.us		
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report notification) all:	30
Steven Brydges		724 980-9960 at ()	
Name	of Person	Area Code Daytime Telephone	: Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	60.00 Filing Fee. Certificate of Status & Certified Copy additional copy is enclosed)
Mailing Addr Registration		Street Address: Registration Section	
	Corporations	Division of Corporations	3
P.O. Box 61		The Centre of Tallahasse	
Tallahassee	, FL 32314	2415 N. Monroe Street, 1	Suite 810

Tallahassee, FL 32303



RECEIVED

2022 APR -7 AM 8: 03

SECRETABLY (TALLAHLSSEE, FÉ

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 14, 2022

BETH CLARK BETH CLARK LLC 2207 HOLLYLEAF LANE ORANGE PARK, FL 32073

SUBJECT: BETH CLARK REALTOR LLC

Ref. Number: L20000356861

We have received your document for BETH CLARK REALTOR LLC and your check(s) totaling \$52.50. 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 Limited Liability Company. Please complete and return the enclosed blank form(s).

The document must be signed by a member or an authorized representative of a member.

Signature must be a member or an authorized representative of a member and not the registered agent.

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.

Diane Cushing Senior Section Administrator

Letter Number: 822A00006049

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Beth Clark Realtor, LLC

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

The Articles of Organization for this Limited Liability Con	npany were filed on November 10, 2020	and assigned
Florida document number L20000356861		100 mg
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
Beth Clark LLC		
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE.	<u></u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:	 	
New Registered Office Address:	Enter Florida street address	
	, Florida _	Zip Code
	•	r

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Change
			□ Add
			□Remove
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			□ Change
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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 605.020. Note: If the date inserted in this block does not neet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. 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 after the ord is filed. Dated 3 3 122	If amending any other inf	ormation, enter change(s) here	: (Attach additional sheets, i	f necessary.)
Effective date, if other than the date of filing: [(optional)] 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 605.0207. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. 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 after the ord is filed.	·			
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Signature of a member or authorized representative of a member		Signature of American	rigad representation of a second	
		Signature of a member of autho	rized representative of a member	
Beth Clark Typed or printed name of signce	Beth Clark			

Filing Fee: \$25.00