L21000126510

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DEC - 8 2021



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SEC TARRED STATE

COVER LETTER

	ration Sec on of Corp		·	•	
	esley Cha	d Lawhon Real Estate Agent I	LC		
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed Ar	rticles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all	correspoi	ndence concerning this matter	to the following:		
		Wesley Chad Lawhon			
			Name of Person		
		Wesley Chad Lawhon Rea	Estate Agent LLC		
			Firm/Company		
		934 N Ferdon Blvd			
			Address	***	
		Crestview, FL 32536			
			City/State and Zip Code		
		wesleychad@kw.com	16.6.	4 (6 4 2)	
For further infor	rmation co	e-mail address: (to be used for future annual repor	(notification)	
Wesley Chad La			850 850-902	2-9928	
	Name of	Person	at () Area Code De	aytime Telephone Number	
Enclosed is a ch	neck for th	e following amount:			
□ \$25.00 Filir	ng Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section		Street Addre Registration			
Division of Corporations		Division of	Division of Corporations		
	Box 632 hassee T	7 FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Wesley Chad Lawhon Real Estate Agent l	LLC	
(<u>Name of the Limited Lia</u> (A Flo	hility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability	y Company were filed on 3-17-2021	and assigned
Florida document number L21000126510	<u></u> .	
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the l	imited liability company here:	
Wesley Chad Lawhon LLC		
The new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
		
Enter new mailing address, if applicable:	·	
(Mailing address MAY BE A POST OFFICE BOX)	·	
		200
B. If amending the registered agent and/or registe	red office address on our records, enter the n	ame of the new register
B. If amending the registered agent and/or registe agent and/or the new registered office address her	<u>e</u> :	, 0 V
		5 5
Name of New Registered Agent:		
		行き口
New Registered Office Address:	Enter Florida street address	15 2
		THE -
	, Florida	Zip Code
	CITE	rap Goac

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
			□Add
			□Remove
			□Change
			□Add
			□Remove
		har	□Change
			□Remove
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			□Adđ
			□Remove
			[]Change
			🗂 Add
			□Remove
			□ Change
		.	□Add
			Remove
			□ Change

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fan effed <u>Note:</u> T	e date, if other than the date of filing:
record d is file	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 _	Signature of a member of a member
	Wesley Chad Lawhon
	Typed or printed name of signee

Filing Fee: \$25.00