

L21 000405740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

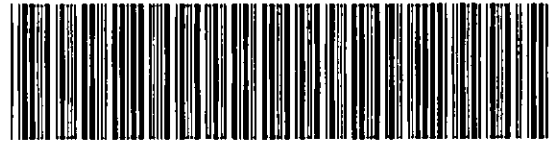
(Document Number)

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2022 AUG 11 PM 2:28

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: MY BROKER REAL ESTATE FLORIDA, LLC**

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:

PAULA BLACK

Name of Person

MY BROKER REAL ESTATE FLORIDA, LLC

Firm/Company

93 EAST HAMPTON DRIVE

Address

AUBURNDALE, FL 33823

City/State and Zip Code

paulablackrealtor@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paula Black

at ( 352 ) 422-2505

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

☐ \$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 Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

2022 AUG 11 PM 2:29

MY BROKER REAL ESTATE FLORIDA, 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 Company were filed on 9/13/21 and assigned  
Florida document number L21000405740

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)**

93 EAST HAMPTON DRIVE

AUBURNDALE, FL 33823

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

93 EAST HAMPTON DRIVE

AUBURNDALE, FL 33823

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

J. A. BRITTON-PLATE

New Registered Office Address:

1853 CARROLL DRIVE

*Enter Florida street address*

ST CLOUD

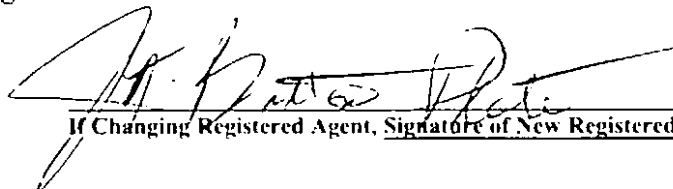
*City*

Florida 34771

*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**

[illegible]

[illegible]

(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 (3)(b)

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 after the record is filed.

Paula Black  
Signature of a member or authorized representative of a member

PAULA BLACK  
Typed or printed name of signee