## 121000508264

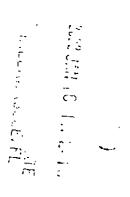
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## **COVER LETTER**

TO: Registration So Division of Cor			
T. Fox Rea SUBJECT:	l Estate LLC		
	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	unitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jamison T Fox		
		Name of Person	<del></del>
	Jamison T Fox LLC		
		Firm/Company	
	1920 Barefoot Place		
		Address	
	Vero Beach, FL 32963		
		City/State and Zip Code	
	tfox@sorensenrealestate.co E-mail address: (	m to be used for future annual report notif	fication)
For further information c	oncerning this matter, please c	alt:	
Jamison T Fox		772 538-3733	
Name o	f Person	at ()	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	El \$30.00 Filing Fee & Certificate of Status	LI \$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 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

T. Fox Real Estate LLC	Company as it now appears on our records.)
( <u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number 1.21000508264	npany were filed on 11/30/2021 1 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
Jamison T Fox LLC	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "ELC" or the abbreviation "E.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	<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 name of the new regis</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	viiler r torida street address
	, Florida

## 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	Type of Action
			∐Add
			□Change
			□ Add
			□Remove
			☐ ☐ Change
			LJAdd
			□Remove
			UAdd
			□Remove
			UAdd
			□ Change
			□Add
			□Remove
			□Change

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				<del></del>
<b>Sective date, if other than the dat</b> in effective date is listed, the date must be setter. If the date inserted in this block coument's effective date on the Depart	pecific and cannot be prior loes not meet the applica	able statutory filing r	(optional) than 90 days after filing.) equirements, this date v	Pursuant to 605,9207 (3' vill not be listed as th
cord specifies a delayed effective dat s filed.	e, but not an effective ti	me, at 12:01 a.m. on	the earlier of: (b) The	90th day after the
January 4th	2022	<u> </u>		
——————————————————————————————————————				
//////	ature of a member or autho	prized representative of	a member	

Filing Fee: \$25.00

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