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Michael Todd Short LLC is requesting that Michael Todd Short be added to authorized person as MGR. Mailing address is 1504 Hawaiian Palm Ln Apopka, FL 32712. My daytime cell number is 407-970-2100. Please add my Federal EIN to the articles as well. My EIN is 88-1180132 and it was issued on 3/11/2022. My Florida Document number is L22000151496. I have enclosed a money order of \$25 for payment.

Thank You, Todd Short

### **COVER LETTER**

# TO: Registration Section **Division of Corporations** Michael Todd Short LLC SUBJECT: 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: Michael Todd Short Name of Person Michael Todd Short LLC/Your Home Sold Guaranteed Realty Central Florida Firm/Company 1504 Hawaiian Palm Ln Address Apopka, FL 32712 City/State and Zip Code michaeltoddmarketing@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Todd Short Name of Person Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

(additional copy is enclosed)

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

Certified Copy

(additional copy is enclosed)

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Michael Todd Short 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  $\frac{03/29/2022}{1}$ \_\_\_\_\_ and assigned Florida document number 1.22000151496 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida 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 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>	<u>Address</u>	<b>Type of Action</b>
MGR	Michael Todd Short	1504 Hawaiian Palm Ln	<b></b> Add
		Apopka, FL 32712	□Remove
			□ Change
			□ Add
			Remove
			Change
		<del></del>	□Add
			□Remove
		<del></del>	Change
			□Add
			□Remove
		<del></del>	Change
			□Add
			□Remove
			□Change
	<del></del>	<del>.</del>	□ Add
		<del></del>	□Remove
			Change

ignature of a member or authorized representative of a member

Michael Todd Shart
Typed or printed name of signee