## L23000432573

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## **COVER LETTER**

	tration Section on of Corporations	
	Millie Barbosa Realtor, LLC	
SUBJECT: _	Name of Li	mited Liability Company
The enclosed A	Articles of Amendment and fee(s) are su	abmitted for filing.
Please return ai	Il correspondence concerning this matte	er to the following:
	Millie Barbosa	
	<del></del>	Name of Person
	Millie Barbosa Realtor, I	LLC
	***************************************	Firm/Company
	3801 W. Hillsboro Blvd.	Apt B103
		Address
	Coconut Creek, FL 3307	3-2071
	millic.a.barbosa@gmail.c	City/State and Zip Code om
	E-mail address:	(to be used for future annual report notification)
For further info	ormation concerning this matter, please	call:
Millie Barbosa	1 	772 521-5575
	Name of Person	Area Code Daytime Telephone Number
Enclosed is a c	heck for the following amount:	
<b>■</b> \$25.00 Fili	ing Fee	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis P.O.	ng Address: stration Section sion of Corporations Box 6327 hassee, 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

Millie Barbosa 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 Company were filed on  $\frac{09/18/2023}{1}$ \_\_\_\_\_ and assigned Florida document number L23000432573 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Millie Barbosa, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 3801 W. Hillsboro Blvd Enter new principal offices address, if applicable: Apt B103 (Principal office address MUST BE A STREET ADDRESS) Coconut Creek, FL 33073-2071 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.

Cin

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>	Type of Action
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			□Remove
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