

L 240000001016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

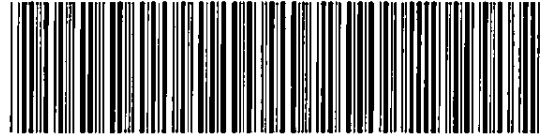
(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

Louis Blum Enterprises PLLC
1949 Coral Gardens Dr
Wilton Manors, FL 33306

February 23, 2024

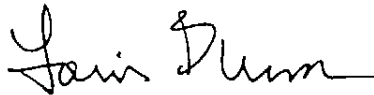
Florida Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Corporation Amendment – Name Change

To Whom It May Concern,

The attached amendment is for a name change to my PLLC. In speaking to DBPR and having my real estate license name match the name that would be associated with my current PLLC, they said I needed to change it from Louis Blum Enterprises PLLC to Louis B. Blum, Jr. PLLC. They said this would make it legal in doing so and having my real estate brokerage issue a W-9 to the new entity Louis B. Blum, Jr. PLLC. Thank you in advance.

Sincerely,

A handwritten signature in black ink that reads "Louis Blum". The signature is written in a cursive style with a large initial "L" and a long horizontal stroke at the end.

Louis Blum
Louis Blum Enterprises PLLC
917-670-8091

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Louis Blum Enterprises PLLC
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:

Louis Blum
Name of Person

Louis Blum Enterprises PPLC
Firm/Company

1949 Coral Gardens Dr
Address

Wilton Manors, FL 33306
City/State and Zip Code

LouisBlumRealtor@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louis Blum at 917 670-8091
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**

Louis Blum Enterprises PLLC

(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 01/03/2024 and assigned Florida document number L24000001016.

This amendment is submitted to amend the following:

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

Louis B. Blum, Jr PLLC

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)

1949 Coral Gardens Dr

Wilton Manors, FL 33306

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1949 Coral Gardens Dr

Wilton Manors, FL 33306

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 _____

City

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

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> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Change |
| _____ | _____ | _____ | <input type="checkbox"/> Add |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Change |
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| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Change |

