

MOW UUUUUUUUU 47

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

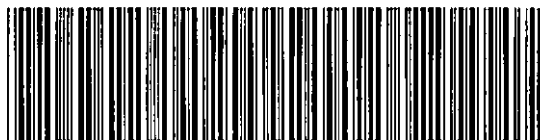
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300322510993

01/08/19--01022--010 **25.00

2019 JAN 28 PM 3:34

FILED

JAN 28

T. L. S. M. P.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Michelson Realty Company, 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:

Matthew Devero
Name of Person

Michelson Realty Company, LLC
Firm/Company

7701 Forsyth Blvd., Ste. 900
Address

St. Louis, MO 63105
City/State and Zip Code

mattd@michelsonrealty.com (no need to change what is currently in the system)
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Devero at (314) 862-7080 or (314) 488-1333
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 15, 2019

MATTHEW DEVERO
7701 FORSYTH BLVD STE 900
ST LOUIS, MO 63105

SUBJECT: MICHELSON REALTY COMPANY LLC
Ref. Number: M04000000047

We have received your document for MICHELSON REALTY COMPANY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a Foreign LLC the document you sent in is for a Florida LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 319A00001171

RECEIVED

2019 JAN 25 PM 2:18

SECRETARY OF STATE
TALLAHASSEE, FL

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Michelson Realty Company, LLC

Enter new principal office address, if applicable: n/a

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address
MAY BE A POST OFFICE BOX)

n/a

2. The Florida document number of this limited liability company is: MO4000000047

3. Jurisdiction of its organization: Missouri

4. Date authorized to do business in Florida: 12/24/2003

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: n/a
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: n/a

New Registered Office Address: n/a

Enter Florida Street Address

n/a

n/a 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

n/a

Add Matthew Devero as Manager

MGR	Matthew Devero	7701 Forsyth Blvd., Ste. 900
		<input checked="" type="checkbox"/> Add
		St. Louis, MO 63105
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Add
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		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
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		<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of the authorized representative

Matthew Devero
Typed or printed name of signee

Filing Fee: \$25.00