

M20 0000006261

(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

A. RIVERS

FEB 1 2022



200378324802

12/21/21--01007--006 \*\*25.00

2022 JAN 28 AM 10:06  
CLERK OF STATE

CD



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2022 JAN 28 AM 8:56

SECRETARY OF STATE  
TALLAHASSEE, FL

January 10, 2022

LUTHER CORE  
253 BERENGER WALK  
ROYAL PALM, FL 33414

SUBJECT: CORE PROPERTY TECHNOLOGY LLC  
Ref. Number: M20000006261

We have received your document for CORE PROPERTY TECHNOLOGY 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):

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

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

Alecia Rivers  
Regulatory Specialist II

Letter Number: 622A00000625

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Core Property Technology LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luther Core

Name of Person

Core Property Technology LLC

Firm/Company

253 Berenger Walk

Address

Royal Palm Beach, FL 33414

City/State and Zip Code

luther@corepropertytech.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Luther Core

215

520-7740

at ( )

Name of Person

Area Code & Daytime Telephone Number

**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

**Enclosed is a check for the following amount:**

- ☒ \$25 Filing Fee    ☐ \$30 Filing Fee & Certificate of Status    ☐ \$55 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**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  
Core Property Technology LLC  
State: \_\_\_\_\_

Enter new principal office 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)

2. The Florida document number of this limited liability company is: M20000006261

3. Jurisdiction of its organization: Pennsylvania  
07/08/2020

4. Date authorized to do business in Florida: \_\_\_\_\_

**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.")  
N/A

(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: \_\_\_\_\_

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.*

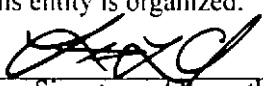
\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Eric Williamson		<input type="checkbox"/> Add
		21700 NORTHWESTERN HWY, STE 802 SOUTHFIELD, MI 48075	<input checked="" type="checkbox"/> Remove
MBR	Anthony Tejeda		<input type="checkbox"/> Add
		1871 NW SOUTH RIVER DR #707 MIAMI, FL 33125	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<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

Luther L. Core Jr.

Typed or printed name of signee

Filing Fee: \$25.00