L08000031407

| (Re | equestor's Name) | | | |
|-------------------------|----------------------|--------------|--|--|
| (Address) | | | | |
| (Ac | ddress) | | | |
| (Ci | ty/State/Zip/Phone # | ¥) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bi | usiness Entity Name |) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates o | of Status | | |
| Special Instructions to | Filing Officer: | | | |
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Office Use Only



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SMC..

OCT 0 2 2020

COVER LETTER

TO:

Tallahassee, FL 32314

| | ration Se on of Cor | ction porations | | • | | |
|---|--|---|---|--|--|--|
| (.) Subject: | | SOCIATES/NAPLES-FT. MY | ERS, LLC | - | | |
| SUBJECT: Name of Limited Liability Company | | | | | | |
| The enclosed A | rticles of . | Amendment and fee(s) are sub | mitted for filing. | | | |
| Please return al | l correspo | ndence concerning this matter | to the following: | | | |
| | | Gerald Messonnier | | | | |
| | | | Name of Person | | | |
| | LEE & ASSOCIATES/NAPLES-FT. MYERS, LLC | | | | | |
| | Firm/Company | | | | | |
| | | 6300 Techster Blvd, Ste 1 | | | | |
| | | | Address | | | |
| | | Fort Myers, FL 33966 | | | | |
| | | | City/State and Zip Code | | | |
| | | jmessonnier@lee-assoicates | .com | | | |
| | | E-mail address: () | to be used for future annual report no | tification) | | |
| For further info | rmation c | oncerning this matter, please ca | all: | | | |
| Gerald Messonnier | | 239 210-7610 | | | | |
| Name of Person | | at () Area Code Daytii | me Telephone Number | | | |
| Enclosed is a cl | heck for th | ne following amount: | | | | |
| ■ \$25.00 Fili | ng 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) | | |
| | ig Addres | | Street Address: | antion | | |
| Registration Section Division of Corporations | | Registration Section Division of Corporations | | | | |
| P.O. Box 6327 | | The Centre of Tallahassee | | | | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EDM: 16 AT 9:07

LEE & ASSOCIATES/NAPLES-FT, MYERS, 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 I. | iability Company | were filed on $\frac{03/27}{1}$ | /2008 | and assigned |
|---|--|---|---|--|
| Florida document number L08000031407 | - | | | |
| This amendment is submitted to amend the following | owing: | | | |
| A. If amending name, enter the new name o | f the limited liabi | lity company here | : | |
| NA | | | | |
| The new name must be distinguishable and contain the w | vords "Limited Liabili | ty Company," the desig | gnation "LLC" or the ab | breviation "L.L.C." |
| Enter new principal offices address, if applic | able: | | | |
| (Principal office address MUST BE A STREE | ET ADDRESS) | | | |
| | | | | |
| | | | | |
| Enter new mailing address, if applicable: | | | | |
| (Mailing address MAY BE A POST OFFICE | BOX) | | | |
| | | · · · · · · · · · · · · · · · · · · · | | |
| B. If amending the registered agent and/or ragent and/or the new registered office address Name of New Registered Agent: | - | ddress on our reco | ords, <u>enter the nam</u> | e of the new registered |
| New Registered Office Address: | | | | |
| New Registered Office Addiess. | | Enter Florida | street address | |
| | | , Florida | | |
| | | City | - | Zip Code |
| New Registered Agent's Signature, if changing I | Registered Agent: | | | |
| I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi being filed to merely reflect a change in the company has been notified in writing of this | er and complete p istered agent as p registered office o | performance of my rovided for in Che | v duties, and I am j upter 605, F.S. Or, | familiar with and if this document is |
| | If Chan | ging Registered Agent | . Signature of New Re | gistered 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

2.227 15 6. 2:07

| <u>Title</u> | Name | Address | Type of Action |
|----------------------------------|--------------------------------|--------------------------------|----------------|
| MGR | JOHNSTON PROPERTIES GROUP, ALC | 14706 OSPREY POINT DRIVE | |
| | | FORT MYERS, FL 33908 | ≣Remove |
| | | | □Change |
| MGR PGH INVESTMENTS. LI | PGH INVESTMENTS, LLC | 6300 TECHSTER BOULEVARD, STE I | □Add |
| | | FORT MYERS, FL 33966 | ■Remove |
| | | | □Change |
| MGR DB REAL ESTATE HOLDINGS, LLC | DB REAL ESTATE HOLDINGS, LLC | 981 MAIN STREET | ≣ Add |
| | | SANIBEL, FL 33957 | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □ Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 1.3AU410 A 9107 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the record is filed.

2020

Dated August 10 Signature of a member or authorized representative of a member Gerald Messonnier Typed or printed name of signee