Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GALBRAITH, PLLC Account Number : I20180000019 : (239)325-2300

Fax Number : (239)325-1065

Enter the email address for this business entity to be used for future

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 1215 EDINGTON PLACE, LLC

Certificate of Status	1
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Estimated Charge	\$60.00

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COVER LETTER

ro:	Registration Sec Division of Corp	tion orations		•			
		TON PLACE, LLC					
SUBJEC	: . <u></u>	Name of Limite	d Liability Company				
		Amendment and fee(s) are subm					
Please re	eturn all correspor	ndence concerning this matter to	the following:				
		ANNE PAUL					
GALBRAITH, PLLC			Name of Person				
Firm Company							
Division of C 1215 Eff SUBJECT: The enclosed Articles Please return all corre For further informat ANNE PAUL		9045 STRAĐA STELL CO	URT #106				
			Address			~	
		NAPLES, FL 34109-4438			·	2019 AUG	,
		apaul@galbraith.law	City/State and Zip Code			∰ -9	一百五元 三百五元
For fur	ther information o	E-mail address: (to oncerning this matter, please ca	o be used for future annual report notifi II:	cation)	•••	PH	
			239 325-2298			կ։ 52	
	Name C	of Person	Area Code Daytime	Telephone Number			
Enclos	ed is a check for t	he following amount:					
□ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &		
			one particollini	ED 4DDDESS.			

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 (((H19000236867 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1215 EDINGTON PLACE, LLC				
(Name of the Limite	d Liability Comput A Florida Limited L	y as it now appears on our record ability Company)	<u>15.</u>)	
The Articles of Organization for this Limited Lit Florida document number L17000149431			and assi	gned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabi	ility company here:		
RICHARD J. SCHULTZ PROPERTIES, LLC			Oll the abbreviation "	LC"
The new name must be distinguishable and contain the w	ords "Limited Liabil	lity Company," the designation "LL	C of the above lation c.	
Enter new principal offices address, if applic	able:	1215 Edington Place, #B-3		
(Principal office address MUST BE A STREET ADD		Marco Island, FL 34145		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and	or registered o	1215 Edington Place, #B-3 Marco Island, FL 34145 office address on our recor	rds, enter the name	of the new
registered agent and/or the new registered o	<u>re</u> :		n	
Name of New Registered Agent:	Galbraith State	utory Agent, LLC		
New Registered Office Address:	9045 Strada S	tell Court, #106		
New Registered Office Address		Enter Florida street add		
	Naples		Florida 34109	
		Ciņ	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

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From: Anne Paul

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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

Title	<u>Name</u>	Address	Type of Action
MGR	RICHARD A. SCHULTZ	1215 EDINGTON PLACE #B-1	Add
		MARCO ISLAND, FL 34145	_ ■ Remove
			□ Change
			☐ Remove
			□ Change
			Add
			Remarks
			Change FILED FILED Remove S2
			□ Change
			Add
			☐ Remove
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