L19000248921

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Emily Hume)
(Document Number)
Certified Copies Certificates of Status
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10/10/20

COVER LETTER

TO: Registration Se Division of Cor			
308 Joel Bl SUBJECT:	vd LLC	•	
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	-	
	Benjamin Hewitt		
		Name of Person	
	M-Properties		
	<u> </u>	Firm/Company	202 TAL
	5784 Enterprise Pkwy		2020 AUG
		Address	28 155 155
	Fort Myers, FL 33905		6 28 PM 2: 27
		City/State and Zip Code	707 2
	benjamin@m-prop.com		
For further information c	oncerning this matter, please c	to be used for future annual report notifiall:	heation)
Benjamin Hewitt		239 443 4653	
Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for th	ne following amount:		
✗ \$25.00 Filing Fee	S30.00 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 Addres Registration S		Street Address:	ation.
Division of C		Registration Sec Division of Cor	
P.O. Box 632	7	The Centre of T	allahassee
Tallahassee. I	FL 32314	2415 N. Monroe	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

308 Joel Blvd, LLC	
(<u>Name of the Limited Liability Company as it now ap</u> (A Florida Limited Liability Company)	pears on our records.) ny)
The Articles of Organization for this Limited Liability Company were filed on	October 03, 2019 and assigned
Florida document number 1.19000248921	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>v here</u> :
M Properties Holdings LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," t	the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	207 TA
	2078 AU
	5 to
C	28 L
Enter new mailing address, if applicable:	-0
Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·
	<u> </u>
	DF
B. If amending the registered agent and/or registered office address on our agent and/or the new registered office address here:	ir records, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
	Florida street address
	. Florida
C'ity	Zin 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>	Name	Address	Type of Action
			
			□Remove
		·	□Change
			□Add
			18 Change
			PMD: 27 Remove
			□Change
			□Add
			□Remove
			□Change
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Effective date, if other than the If an effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and one of the control o	cannot be prior eet the applica	to date of filing of the statutory f	or more than 90 day	(optional) s after filing.) I s, this date w	Pursuant to 60 ill not be lis	5.0207 (3 ted as th
e record specifies a delayed effective rd is filed.	date, but not a	an effective tir	me, at 12:01 a.	m, on the earlier	of: (b) The	90th day afte	er the
Dated June 15	·	2020	·				
Henri W. Howitt							
	Signature of a m	ember or autho	rized representa	tive of a member			

Filing Fee: \$25.00