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| (| Business | Entity Nar | ne) |
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TRANSMITTAL LETTER

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TO:

Registration Section

| SUBJECT: Tradewinds Plaza, 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: Patricia E. Bologna Garagozlo (Name of Person) P.O. Box 410686 (Address) Melbourne, Florida 32941 (City/State and Zip Code) For further information concerning this matter, please call: Patricia E. Bologna Garagozlo (Name of Person) (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 2 \$25.00 Filing Fee | Division of | of Corporations | | | | | |
|--|-------------------------|-------------------------------------|----------------------|---|-----|--|--|
| (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: Patricia E. Bologna Garagozlo (Name of Person) (Firm/Company) P.O. Box 410686 (Address) Melbourne, Florida 32941 (City/State and Zip Code) For further information concerning this matter, please call: Patricia E. Bologna Garagozlo (Name of Person) (Name of Person) (Area Code & Dayrime Telephone Number) Enclosed is a check for the following amount: 1 \$25.00 Filing Fee S \$30.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy | SURJECT: Trac | dewinds Plaza, LLC | | | | | |
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| Melbourne, Florida 32941 (City/State and Zip Code) For further information concerning this matter, please call: Patricia E. Bologna Garagozlo (Name of Person) (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$\int \frac{321}{55.00} Filing Fee & | | • | (Firm/Company) | | | | |
| Melbourne, Florida 32941 (City/State and Zip Code) For further information concerning this matter, please call: Patricia E. Bologna Garagozlo (Name of Person) (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$\int_{\text{\$25.00 Filing Fee}} \text{ \$30.00 Filing Fee} \text{ \$55.00 Filing Fee} \text{ \$60.00 Filing Fee}, Certificate of Status} | | P.O. Box 410686 | | | | | |
| City/State and Zip Code) For further information concerning this matter, please call: Patricia E. Bologna Garagozlo (Name of Person) (Name of Person) Enclosed is a check for the following amount: \$\square{\square*} \square{321} 757-7570 \\ (Area Code & Daytime Telephone Number) \$\square{\square*} \square{325.00} \text{Filing Fee} \square{360.00} \text{Filing Fee}, \text{ Certificate of Status} | | | (Address) | | | | |
| For further information concerning this matter, please call: Patricia E. Bologna Garagozlo (Name of Person) Enclosed is a check for the following amount: \$\int_{\text{S25.00 Filing Fee}}^{\text{F0}} = \int_{\text{S30.00 Filing Fee}}^{\text{F0}} \text{S25.00 Filing Fee} \text{Certificate of Status} Certificate of Status & Certi | | Melbourne, Florida | a 32941 | | | | |
| Patricia E. Bologna Garagozlo (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: (St. S25.00 Filing Fee St. S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & | | (City | /State and Zip Code) | | | | |
| (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: (Substituting Fee Substituting Status Substituting Fee & Status Substituting Fee & Status Substituting Fee & Certificate of Status Substi | For further informa | tion concerning this matter, please | call: | 2005 AP SECRE | | | |
| Enclosed is a check for the following amount: 2 \$25.00 Filing Fee \$\text{S25.00 Filing Fee & Certificate of Status}} 5 \$25.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & | Patricia E | | aı (| | 1 | | |
| Certificate of Status Certified Copy Certificate of Status & | | (Name of Person) | (Area Code & Daytime | - 1 ** | t E | | |
| Certificate of Status Certified Copy Certificate of Status & | Enclosed is a check for | or the following amount: | | FSTIG STIG | - | | |
| (additional copy is enclosed) | | ☐ \$30.00 Filing Fee & | | Certificate of Status & Certified Copy | | | |

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | Fradewinds Plaza, LLC | _ | <u> </u> |
|--------------------|---|--|---|
| | (A Florid | (Present Name) da Limited Liability Company) | |
| | | | |
| FIRST: | The Articles of Organization were file document number L02000028715 | ed on 10/28/2002 | and assigned |
| SECOND: | The following amendment(s) to the liability company: | he Articles of Organization was/we | ere adopted by the limited |
| The | Principal address shall be amended to | | nes Boulevard Ige, Florida 32955 |
| Addi | tional Managing Members are hereby | added: | |
| | Paul J. Bologna P.O. Box 410686 Melbourne, Florida 32941 | Patricia E. Bologna-Garagoz P.O. Box 410686 Melbourne, Florida 32941 | do * |
| Dated <u>April</u> | Signature of a member | or authorized representative of a mem | SECRETARY OF STATE SECRETARY OF STATE ALLAHASSEE, FLORIDA |
| | Турес | d or printed name of signee | |

Filing Fee: \$25.00