L04000031

(Re	questor's Name)	
(Ad	dress)	<u> </u>
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(Cit	ty/State/Zip/Phone	e #)
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JUL 2 9 2014 S. YOUNG

COVER LETTER

		00, =========		
TO: Registration Se	ction porations	s ye		
	lealmark Retai	Il Operations,	LLC	
SUBJECT:		ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Denn	is J. Bessey		
		Name of Person		-
	Bess	sey Law, P.A.		三部二
		Firm/Company		星色工
	P.(O. Box 100013	3	20万
		Address		- -
	Ca	pe Coral, FL	33910	
		City/State and Zip Code	· · · · · ·	- \$2.0 m
		sey@besseylaw.co		
		•	i nouncation)	
_	oncerning this matter, please c			
Denn	is J. Bessey	at ()	5-6107	
Name o	of Person	Area Code D	aytime Telephone Numbe	r
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)) Certified	ate of Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Realmark Retail C	•	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our reco Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L0400021031</u> .	y were filed on <u>03/18/2004</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and end with the words "Limited Lia	bility Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	350 East Marion Ave	enue
Principal office address MUST BE A STREET ADDRESS)	Punta Gorda, FL 33	950 ====================================
Enter new mailing address, if applicable:	P.O. Box 100013	11.5
Mailing address MAY BE A POST OFFICE BOX)	Cape Coral, FL 3391	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:		rds, enter the name of the
New Registered Office Address:	350 East Marion Avenue	
New Registered Office Address.	Enter Florida street ada	
	Punta Gorda	Florida 33950
	, and oorda	Florida 00000

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

Page 1 of 3

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member **Address Type of Action Title** <u>Name</u> 5789 Cape Harbour Drive William J. Stout, Jr. MGR Suite 201 **■** Remove Cape Coral, FL 33914 P.O. Box 100013 Dennis J. Bessey **MGR ■** Add Cape Coral, FL 33910 ☐ Remove ☐ Remove ☐ Remove □ Add ☐ Remove ☐ Add ☐ Remove

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			orized representative of	
	cument is filed by	cument is filed by the Florida Departme	re, if other than the date of filing: te must be specific, cannot be prior to date of receipt or focument is filed by the Florida Department of State) My My	· \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Page 3 of 3

Filing Fee: \$25.00