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## **COVER LETTER**

TO:

TO:	Registration S Division of Co			
SUBJEC		ommercial Properties, LLC		
SOBJEC	-I; <u> </u>	Name of Limit	ed Liability Company	<del></del>
The encl	osed Articles o	f Amendment and fee(s) are subm	nitted for filing.	
Please re	eturn all corresp	ondence concerning this matter to	the following:	
		Jonathan P. Richards		
			Name of Person	
		Sunbelt Commercial Property	ties, LLC	
			Firm/Company	
		16328 Corsica Way, Unit 10	)1	
			Address	<del></del>
		Naples, FL 34110		
		· · · · ·	City/State and Zip Code	111111111111111111111111111111111111111
		sunbeltcommercial@gmail.co		
For furth	ner information	e-mail address: (to	be used for future annual report no ::	outication)
Jonathar	n P. Richards		239 287-5350	
	Name	of Person		me Telephone Number
Enclosed	d is a check for	the following amount:		
□ <b>\$</b> 25.	.00 Filing 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)
	Mailing Addre Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration S Division of C The Centre of	or <del>p</del> orations

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Sunbelt Commercial Properties, 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 Liability Company were filed on October 28, 2004 \_\_\_\_\_ and assigned Florida document number \_\_\_\_\_L04000078213 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_. Florida \_

## 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 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>	<u>Name</u>	Address	Type of Action
AMBR	Jonathan Richards Corporation	16328 Corsica Way, Unit 101, Naples, FL 34110	<b>=</b> Add
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Filing Fee: \$25.00