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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| TO: Registration : Division of C | | | | |
|----------------------------------|--|---|---|--|
| | OLDINGS LLC | | | |
| SUBJECT: | Name of Limi | ted Liability Company | | |
| The enclosed Articles of | of Amendment and fee(s) are sub | nitted for filing. | | |
| Please return all corres | pondence concerning this matter | to the following: | | |
| | STEVEN R WHITLEY | | | |
| | | Name of Person | | |
| • | WILTSHIRE, WHITLEY, | RICHARDSON & ENGLISH | | |
| | | Firm/Company | | |
| | 5249 SUMMERLIN COMMONS BLVD., STE. 100 | | | |
| | | Address | | |
| | FORT MYERS, FL 33907 | | | |
| | | City/State and Zip Code | | |
| - | Maryann@sunnygrove.com | | - | |
| | E-mail address: (| to be used for future annual report noti | fication) | |
| For further information | n concerning this matter, please ca | all: | | |
| Steven R Whitley | | 239 334-9191 at () | | |
| Name | e of Person | Area Code Daytim | e Telephone Number | |
| Enclosed is a check fo | r the following amount: | | | |
| \$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 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

| 、 MBW HOLDINGS, 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 11/22/2004 ar | nd assigned |
| Florida document number L04000084926 | |
| | |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liability company here: | |
| | 5 00 |
| The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviat | ion ⁴ L.L.Q. |
| | E AET |
| Enter new principal offices address, if applicable: | |
| (Principal office address MUST BE A STREET ADDRESS) | |
| | <u> </u> |
| | 9: 2 |
| Enter new mailing address, if applicable: | <u> </u> |
| (Mailing address MAY BE A POST OFFICE BOX) | · · · · · · · · · · · · · · · · · · · |
| • | |
| | |
| B. If amending the registered agent and/or registered office address on our records, enter the n | name of the nev |
| registered agent and/or the new registered office address here: | |
| | |
| Name of New Registered Agent: | |
| | |
| New Registered Office Address: Enter Florida street address | |
| | |
| , Florida, 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> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|------------------|---|----------------|
| MGR | STEVEN R WHITLEY | 5249 SUMMERLIN COMMONS BLVD FORT MYERS, FL 33907 | Add |
| | STEVEN R WHITLEY | | |
| | | | Remove |
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| Effect | tive date, if other than t | he date of filing | g: | Jose of Elina or more | (optiona | l) | ก วกว |
| Note: | If the date inserted in this nent's effective date on the | block does not n | neet the applicab | le statutory filing r | equirements, this da | te will not be listed | d as |
| he ree | cord specifies a delay e 90th day after the r | ed effective o ecord is filed. | late, but not a | an effective tim | ie, at 12:01 a.m | . on the earlier | r of |
| Dated | NOVEMBER 21 | , , | 2017 | | | | |
| | | //// | | • | | | |
| | 1/5 | x uu | \sim | zed representative of | | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00