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EXAMINER

COVER LETTER

SUBJECT: 610 Dev	elopment Company	, LLC		
(Name of Limited Liability Company)				
The enclosed Articles of A	amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	idence concerning this matter	to the following:		
	Wanda Quillinan, Parale			
		(Name of Person)		
	Douglas A. Wood, P.A.			
		(Firm/Company)		
	1100 Fifth Avenue South	. Suite 101		
	11001	(Address)		
	Naples, FL 34102			
	Naples, FL 34102	(City/State and Zip Code)		
For further information co	ncerning this matter, please ca	all:	TAT 2000	
Wanda Quillinan, Parale	egal	at (239) 263-7740	SECRETARY SECRET	j
(Name of		(Area Code & Daytime T	'elephone Number)	ratio è
			2	7
Enclosed is a check for the	e following amount:		OF STA	Marie ,
2 \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	□\$60.00 Filing Eee ☐ □ Certificate of Status &	
	Confidence of Status	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)	
			(additional copy is enclosed)	
2				

MAILING ADDRESS:

Registration Section • Division of Corporations

TO:

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

610 Development Company, 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 February 1, 2006 and assigned Florida document number L06000011386 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 end with 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: 1100 Fifth Avenue South, Suite 101 New Registered Office Address: (Enter Florida street address) Florida 34102 Naples, FL 34102 (Zip 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action **Address Title** <u>Name</u> MGR Smith, Adam 2383 Linwood Avenue #310 **□** Add Remove Naples, FL 34112___ Naples Re-Development, Inc. 2383 Linwood Avenue #310 MGR #₹ Add Naples, FL 34112 Remove 🗂 Add Remove ☐ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Dated February 3 Signature of a member or authorized representative of a member Adam Smith Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00