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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

	legistration Sc Division of Cor			
	Naples Ass	ociates LLC	•	
SUBJEC'	l:	Name of Lim	ited Liability Company	
The enclos	sed Articles of	Amendment and feers) are sub	mitted for filing	
Please reti	ırn all correspo	ndence concerning this matter	to the following:	
		Andrew Hawrych		
			SLLC Name of Limited Liability Company diment and feets) are submitted for filing e concerning this matter to the following: Name of Person	
		Naples Associates LLC		
			Firm Company	
		1205 Piper Boulevard Suit	e 204	
			Address	
		Naples, FL 34110		
			City State and Zip Code	
		hawiyehiid a yahoo,com	to be noted that future manned research and	tribostom)
For further	information c	oncerning this matter, please ea	·	(incanva)
Andrew I	lawrych			
	Name o	l'Person	Area Code Daytir	ne Telephone Number
Enclosed i	s a check for th	ne following amount		
■ \$25 (X) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	Registr	ING ADDRESS: ation Section n of Corporations	STREET/COUR Registration Secti Division of Corpo	on

P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Naples Associates LLC		
(<u>Name of the Limited Liability Company as it no</u> (A Florida Limited Liability Co	w appears on our records,) ompany)	_
The Articles of Organization for this Limited Liability Company were file	ed onai	nd assigned
Florida document number LOGORO48516		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liability com</u>	<u>pany here</u> :	
The new name must be distinguishable and contain the words "Limited Liability Compa	ny," the designation "LLC" or the abbreviati	on "LiLiC."
Enter new principal offices address, if applicable:		16 S
(Principal office address MUST BE A STREET ADDRESS)		F CHIS
		
		- O (전환) - P 경영학
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		- T 22
<u></u>		
B. If amending the registered agent and/or registered office address here:	lress on our records, <u>enter the n</u>	ame of the nev
Name of New Registered Agent:		 -
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
City	7/10	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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	VINOGRADOV, ALEXEY	1205 PIPER BOULEVARD	
		SUITE 204	■ Remove
		NAPLES, FL 34110	Change
MGRM	HBD ASSOCIATES LLC	1205 PIPER BOULEVARD	■ Add
		SUITE 204	
		NAPLES, FL 34110	
			🗖 Add
			□ Remove
			□ Change
			Add
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Effective date, if other than If an effective date is listed, the dat Note: If the date inserted in the document's effective date on the second secon	nis block does	not meet the	e applicable	: statutory fi	ling requirem	ents, this date) g)Pursuant to) rwill not be]	605,020 isted a	97 r is ti
he record specifies a del The 90th day after the			but not a	n effectiv	e time, at .	12:01 a.m.	on the ea	rlier (of:
Dated July 5		201	8						
	diana	I lon	114	/ /					
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	Signorun	y a member	r or authoriza	ed representat	ne of a memb	ei			

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Filing Fee: \$25.00