L06000079383

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COVER LETTER

TO: Registration Section **Division of Corporations** Presidential Holdings of SWFL, LLC SUBJECT: _ Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Frank J. Aloia, Jr., Esq. Name of Person Aloia | Roland Firm/Company 2222 Second Street Address Fort Myers, FL 33901 City/State and Zip Code faloia@lawdefined.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 791-7950 Frank J. Aloia, Jr., Esq. Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **■ \$25.00** Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: **Mailing Address:** Registration Section Registration Section 2021 AFR 25 P 3: **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Presidential Holdings of SWFL, LLC		
(<u>Name of the Limited Liabi</u> (A Florio	ility Company as it now appears on our reco da Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Florida document number <u>L06000079383</u>	Company were filed on 08/11/2006	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
•		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:		r the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	ess
	, F	Florida
	City	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 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
MGRM	Martin Haas	422 SW 45th Street	□ Add
		Cape Coral, FL 33914	= Remove
			□Change
			□ Add
			□Remove
			□ Change
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ument's effective date on the	Department of State's records.		2021
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*	Signature of a member or authorized	representative of a member	

Filing Fee: \$25.00