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| Special Instructions to I | Filing Officer: | |
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| Cape Coral Financia | al Center, L.L.C | Z | |
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| | | | Art of Inc. File |
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| | | | Foreign Corp. File |
| | | | L.C. File |
| | | | Fictitious Name File |
| | | | Trade/Service Mark |
| | | | Merger File |
| | | | Art. of Amend. File |
| | | | RA Resignation |
| | | | Dissolution / Withdrawal |
| | | | Annual Report / Reinstatement |
| | | | Cert. Copy |
| | | | Photo Copy |
| | | | Certificate of Good Standing |
| | | | Certificate of Status |
| | , | | Certificate of Fictitious Name |
| | | | Corp Record Search |
| | | | Officer Search |
| | | • | Fictitious Search |
| Signature | | | Fictitious Owner Search |
| | | | Vehicle Search |
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| Name | Date | Time | UCC 11 Search |
| | Date | THE | UCC 11 Retrieval |
| Walk-In | Will Pick Up | | Courier |

COVER LETTER

| | ion Section of Corporations | |
|-------------------|--|------------|
| Car SUBJECT: | Coral Financial Center, L.L.C. | |
| SUBJECT: | Name of Limited Liability Company | |
| The enclosed Art | eles of Amendment and fee(s) are submitted for filing. | |
| Please return all | prespondence concerning this matter to the following: | |
| | Frank J. Aloia, Jr. | |
| | Name of Person | |
| | Aloia, Roland & Lubell, PLLC | |
| | Firm/Company | |
| | 2254 1st Street | |
| | Address | |
| | Fort Myers, FL 33901 | • |
| | City/State and Zip Code | |
| | faloia@floridalegalrights.com | |
| | E-mail address: (to be used for future annual report notification) | |
| For further infor | ation concerning this matter, please call: | |
| Frank J. Aloia, J | 239 791-7950 at () | |
| | Name of Person Area Code Daytime Telephone Number | |
| Enclosed is a che | k for the following amount: | |
| ■ \$25.00 Filing | Fee \$\sum \$30.00\$ Filing Fee & \$\sum \$55.00\$ Filing Fee & \$\sum \$60.00\$ Filing Certificate of Status Certified Copy Certificate of Certified Copy (additional copy is enclosed) Certified Co (additional copy is enclosed) | f Status & |

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

Cape Coral Financial Center, LLC (Name of the Limited Liability Company as II now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 11/07/2006 and assigned Florida document number L06000107931 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 3501 Del Prado Blvd, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 435 Docksido Drivo, Unit 704 Enter new principal offices address, if applicable: Naples, PL 34110 (Principal office address MUST BE A STREET ADDRESS) 435 Dockside Drive, Unit 704 Enter new mailing address, if applicable: Naples, FL 34110 (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 City 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> | Name | Address | Type of Action |
|-------------------------------------|------------------------------|----------------------------|----------------|
| MGR | Weiner Corporation | 11999 Palba Way, Unit 6402 | Add |
| | | Fort Myers, FL 33912 | ■ Remove |
| | | | ☐ Change |
| MGR Webster Ventures of Florida LLC | 435 Dockside Drive, Unit 704 | = Add | |
| | | Naples, FL 34110 | 🖸 Remove |
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| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary. | | |
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| E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records. | Pursuant to 605.0207 (vill not be listed as t | 3)(b) he |
| If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. o (b) The 90th day after the record is filed. | n the earlier of: | |
| Dated 1/1/2 Christopher Robert Managin W. Stenature of a member or authorized representative of a member of | tember t | _ |
| Chris Robert, Managing Member of Webster Ventures of Florida, LLC | | |

Page 3 of 3

Typed or printed name of signed

Filing Fee: \$25.00