## 106000122509

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone #)	
PICK-UP	WAIT MA	AIL
(Bus	siness Entity Name)	
(Doc	cument Number)	
Certified Copies	Certificates of Status	
Special Instructions to I	Filing Officer:	
		!
	<del></del>	

Office Use Only



800344025968

05/05/20--01006--014 ++25.00 RECEIVED MAY 0.4 2020

R. WHATE MAY 19 2020

## COVER LETTER

Registration Section Division of Corporations

TO:

	sey Way LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	T. Drew Drake		
		Name of Person	
	5275 Ramsey Way, LLC	;	
		Firm/Company	<del></del>
	1205 Westfield Dr		
		Address	<del></del>
	Fort Myers, FL 33919		
	- <del></del>	City/State and Zip Code	<del> </del>
	drewdrakeco@embarqm		
	E-mail address: (	to be used for future annual report not	tilication)
For further information c	oncerning this matter, please c	all:	
T. Drew Drake		239 940-0036	
Name o	l'Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S Division of C P.O. Box 632	Section forporations 7	Street Address: Registration Se Division of Co The Centre of	rporations Tallahassee
Tallahassee, l	*L 32314	2415 N. Monro	be Street, Suite 810

Tallahassee. FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

5275 Ramsey Way, LLC

2620 -4 1.112:119

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited i	maoning Company)		
The Articles of Organization for this Limited Liability Company Florida document number L06000122509 .	were filed on 12/2	7/2006	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the des	signation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		i-	
(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 a	address on our re	cords, enter the name	of the new regist
agent and/or the new registered office address here:			
Name of New Registered Agent:		<del></del> · -	<u> </u>
New Registered Office Address:	Enter Floric	la street address	
		Florido	
	City	Florida	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 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mgr	Thomas G. Drake	1205 Westfield Dr.	□ Add
		Fort Myers, FL 33919	■ Remove
			□Change
Mgr	1gr Alison L. Drake	1205 Westfield Dr.	Add
		Fort Myers, FL 33919	□Remove
			□Change
Mgr	Joanne A. Drake	1205 Westfield Dr.	<b>\</b> Add
		Fort Myers, FL 33919	□Remove
		Change	
			□ Add
			Remove
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change
			□Remove
			Change
<del></del>			Add
			□Remove
			□ Change

		, <del></del>					
						••	
			•		*****		<del></del>
					<u> </u>	-	
				<u> </u>	<del> </del>	<del></del>	
<del></del>							
				. ==			
			<del></del>		· · · · ·		
						, - , <del></del>	<del></del>
	<del> </del>						
			<u> </u>				
					#		<del></del>
			April 7, 2020				
Effective date, if on the life an effective date is life Note: If the date in document's effective document's effective date.	sted, the date must be serted in this block	te of filing: _ specific and car does not meet	nnot be prior to d		e than 90 days af		
e record specifies a c rd is filed.	delayed effective d	ate, but not an	effective time	, at 12:01 a.m. or	the earlier of:	(b) The 90th da	y after th
April 30		-	2020				
Dated	1 T	DU	J				
Dated April 30	Sig	mature of a men	ber or authorize	ed representative o	f a member		

Filing Fee: \$25.00