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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ROBERT D. ROYSTON, JR., P.A.

Account Number : I20150000047 Phone : (239)205-2225 Fax Number : (239)205-2016

 $\ddot{\omega}$

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.**

Email Address: _____rroyston@rroystonlaw.com

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M. SOLOMON

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To:

(((H21000172385 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	(A Florida Limited)			
The Articles of Organization for this Limited L	iability Company	were filed on 11/28/2007	and assigned	
Florida document number L07000119027	·			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name of	f the limited liab	ility company here;		
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC" or the abbrev	viation "L.L.C."	_
Enter new principal offices address, if applicable:		12140 Carissa Commerce Court, Suite 102	2	
(Principal office address MUST BE A STREE		Fort Myers, FL 33966	> # >	· ·
		······································	<u></u>	-
			Fig. 4	, [
Enter new mailing address, if applicable:				_ (
(Mailing address MAY BE A POST OFFICE	BOX)		OR E	-
				<u>. </u>
B. If amending the registered agent and/or ragent and/or the new registered office address	ss here:		of the new regi	tered
B. If amending the registered agent and/or ragent and/or the new registered office address Name of New Registered Agent:	Robert D. Roy	ston, Jr., P.A.	of the new regi	tered
agent and/or the new registered office addre	Robert D. Roy		of the new regi	tered
Name of New Registered Agent:	Robert D. Roy	ston, Jr., P.A. Commerce Court, Suite 102 Enter Florida street address		etered
Name of New Registered Agent:	Robert D. Roy:	ston, Jr., P.A. Commerce Court, Suite 102		etered
Name of New Registered Agent:	Robert D. Roy: 12140 Carissa Fort Myers	Ston, Jr., P.A. Commerce Court, Suite 102 Enter Florida street address Florida 33966 City		etered

If Changing Begistered Agent Signature of New Registered Agent

To:

Fax: (850) 617-6383

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Remove

Change

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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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
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		-	□Remove
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). If amending any other information, enter change(s) here: (A	
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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 dat Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory tiling requirements, this date will not be used as the
the record specifies a delayed effective date, but not an effective time, a pord is filed.	at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated April 29 . 2021	mmy
Signature of a member opaulitorized	representative of a member
Robert D. Royston, Jr.	
Typed or printed na	me of signee