L09 0000 92328

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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RECFIVED MAY 2.8 2019



COVER LETTER

| TO: * Registration Sec Division of Corp | | 4 | |
|--|--|---|---|
| SUBJECT: Nat | oles Bange Name of the | Pental Ll ited Liability Company | <u>C</u> |
| The enclosed Articles of A | amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspon | dence concerning this matter | to the following: | , |
| | <u>8/113</u> | Name of Person | |
| | Naples B | Pirm/Company | LC |
| | 2015 | Bayview Dr. Address | |
| | | FL 34112 City/State and Zip Code | |
| For further information co | E-mail address: () neerning this matter, please ea | TICKMATINE. Coto be used for future annual report notional. | fication) |
| E'lioe | | at (<u>239)</u> 949 Area Code Daytim | - 5538 |
| Name of | Person | Area Code Daytim | e Telephone Number |
| Enclosed is a check for the | following amount: | | |
| □ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | |

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

| Naples Barge Re | irlal LLC |
|--|---|
| (Name of the Limited Liability Company (A Florida Limited Lia | as it now appears on our records.) bility Company) |
| The Articles of Organization for this Limited Liability Company w Florida document number <u>LO9000 92 32</u> 8 | rere filed on <u>09/24/2009</u> and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liabili | ty company here: |
| N/A | · · |
| The new name must be distinguishable and contain the words "Limited Liability | y Company," the designation "L.L.C." or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 2915 Bayview Dr. |
| (Principal office address MUST BE A STREET ADDRESS) | <u>Maples</u> , FL 34112 |
| | |
| Enter new mailing address, if applicable: | 2815 Bayview Dr. |
| (Mailing address MAY BE A POST OFFICE BOX) | <u>Naples</u> , FL 34112 |
| B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here: Name of New Registered Agent: | ce address on our records, enter the name of the |
| New Registered Office Address: N/ | |
| | A |
| | City Zip Code |
| New Registered Agent's Signature, if changing Registered Agent: | |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change. | erformance of my duties, and I am familiar with and ovided for in Chapter 605, F.S. Or, if this document is |

N/A
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 add or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------|--------------------|----------------|
| | NA erick Grea | Il 2915 Bayview Dr | <u>′</u> □ Add |
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| etiv | The date, if other than the date of filing: $05/22/2019$ (optional) |
| effe | ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 |
| | f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as nt's effective date on the Department of State's records. |
| | |
| 200 | and apparition a delayed affective date, but not an affective time, at 13,01 a.m. on the saulier of |
| re ' | and specifies a delayed effective date, but not an effective time, at $12:01 \text{ a.m.}$ on the earlier of 90th day after the record is filed. |
| | |
| vd. | May 22nd 2019. |
| -u _ | 1 that it is a second of the s |
| | Tregary S. Onis II |
| | Signature of a member or authorized representative of a member |
| | • 71 |
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Page 3 of 3

Filing Fee: \$25.00