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(Business Entity Name)

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SECURITY OF STATE
TALLAHASSEE, FLORIDA

APR 24 2018
J. HARRIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: L.O. DEVELOPMENT LLC

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:

MARTHA I. KARLSTEDT

Name of Person

L.O. DEVELOPMENT LLC

Firm/Company

P.O. BOX 101108

Address

CAPE CORAL, FL 33910

City/State and Zip Code

INFO@MK-CONSTRUCTION.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call: ...

ILLIANA VELEZ

941
at ()

637-8705

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration 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**

L.O. DEVELOPMENT LLC

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

The Articles of Organization for this Limited Liability Company were filed on 11/06/09 and assigned
Florida document number L09000107743.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

10580 COLONIAL BLVD.

SUITE 114

FORT MYERS, FL 33913

Enter new mailing address, if applicable:

(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:

MARTHA I. KARLSTEDT

New Registered Office Address:

10580 COLONIAL BLVD., SUITE 114

Enter Florida street address

FORT MYERS

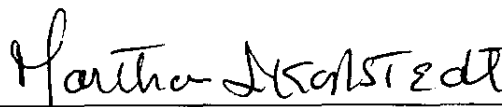
City

, Florida 33913

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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	MAGNUS KARLSTEDT	6660 TAYLOR RD,	<input type="checkbox"/> Add
		UNIT 111	<input checked="" type="checkbox"/> Remove
		PUNTA GORDA, FL 33950	<input type="checkbox"/> Change
MGRM	MARTHA I. KARLSTEDT	10580 COLONIAL BLVD.	<input checked="" type="checkbox"/> Add
		SUITE 114	<input type="checkbox"/> Remove
		FORT MYERS, FL 33913	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TRANSPORTATION
TALLAHASSEE, FLORIDA

[illegible]

(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.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated APRIL 19, 2018

Signature of a member or authorized representative of a member

MAGNUS KARLSTEDT, MGRM

Typed or printed name of signee

FILED
2018 APR 23 AM 10:15
TALLAHASSEE, FLORIDA