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COVER LETTER

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TO: Registrat Division	Section Torporations	
	rn & Persons, P.L.	
SUBJECT:	Name of Limited Liability Company	
The enclosed Artic	of Amendment and fee(s) are submitted for filing.	
Please return all co	spondence concerning this matter to the following:	
	E. Bruce Strayhorn	
	Name of Person	
	Strayhorn & Persons, P.L.	
	Firm/Company	
	2125 First Street, Suite 201	~
	Address Fort Myers, Florida 33901	2023 FEB
	City/State and Zip Code bruce@strayhornlaw.com	9-
For further inform	E-mail address: (to be used for future annual report notification) n concerning this matter, please call:	AM 9: 3
Jennifer L. Fisher	239 334-1260 at ()	~
	e of Person Area Code Daytime Telephone Number	
Enclosed is a chec	r the following amount:	
≘ \$25.00 Filing	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Stat (additional copy is enclosed) Certified Copy (additional copy is enclosed)	tus &
Divisior P.O. Bo	n Section Registration Section f Corporations Division of Corporations	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Strayhorn & Persons, P.L.				_	
(<u>Name of the Limite</u>	d Liability Compan A Florida Limited Li	y <mark>as it now appears on ou</mark> ability Company)	r records.)		
The Articles of Organization for this Limited Lie Florida document number L09000112807 This amendment is submitted to amend the follo	ability Company v		er 24, 2009 and	ED23 FEB -	
A. If amending name, enter the new name of	the limited liabil	ity company here:	28. 28. 1.	5 ; = []	
Strayhorn, Persons-Mulicka & Fisher, P.L.	the mater man		1976 1937		
The new name must be distinguishable and contain the wa	ords "Limited Liabilit	y Company," the designat	ion "LLC" or the abbreviation	• •	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2125 First Street Suite 201	f·1	7	
		Fort Myers, FL 33901			
	1011.117013,712.33301				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office ac	ldress on our record	s, enter the name of the	new registered	
Name of New Registered Agent:	E. Bruce Strayho	orn	<u> </u>		
New Registered Office Address:	2125 First Street	Suite 201 Enter Florida str.			
	Fort Myers		Florida 33901 Zip Code		
New Registered Agent's Signature, if changing B	Registered Agent:		.,		
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as region being filed to merely reflect a change in the re company has been notified in writing of this	d agent and agre er and complete p stered agent as p registered office o change.	performance of my d rovided for in Chapt address, I hereby con	uties, and Lam familiar er 605, F.S. Or, if this a	with and locument is ubility	

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being ad MGR = Manager AMBR = Authorized Member **Title** <u>Name</u> Address ${\rm MGR}$ E. Bruce Strayhorn Type of Action 2125 First Street, Suite 201, Fort Myers, Florida 33901 □Remove MGR Jenna D. Persons-Mulicka ----- □Change 2125 First Street, Suite 201, Fort Myers, Florida 33901 ——— □Add □ Remove MGR Jennifer L. Fisher _ XChange 2125 First Street, Suite 201, Fort Myers, Florida 33901 ------ □Remove ----- □Change Remove 6 April Change ——— □Remove ——— □Change ———— □Remove ———— DChange

). If amending	any other inform	ation, enter c	change(s) here:	(Attach addi	itional sheets, t	j necessai	ツリ		
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Effective dat	e, if other than th	e date of filin	g:			optional))		
(If an effective d Note: If the c	e, if other than the ate is listed, the date mu- late inserted in this b	ist be specific and lock does not i	d cannot be prior to meet the applicab	date of filing o le statutory fi	r more than 90 day ling requiremen	's after filing ts, this dat	g.) Pursuan e will not	it to 605. be liste	0207 ed as 1
document's e	ffective date on the L	Department of S	State's records.						
he record speci ord is filed.	fies a delayed effecti	ve date, but no	t an effective time	e, at 12:01 a.r	n. on the earlier	of: (b)	he 90th d	ay after	the
Noven	iber 2		2022						
Dated				0/	1-1-	1-	=		
					6 11				
		Signature of a	member or authoriz	red representat	ive of a member	/			
E.	Bruce Strayhorn					_ -	<u>-</u>		
			Typed or printed	name di siene			_		

Filing Fee: S25.00