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COVER LETTER

TO: Registration Se Division of Cor			
HAZMAT SUBJECT:	- I LLC		
SUBJECT.	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Richard Blackwell	•	
		Name of Person	···
	Blackwell, Vishio & Fishe	r PLLC	
		Firm/Company	
	801 Anchor Rode Drive, S	uite 203A	
		Address	
	Naples, FL 34104		
		City/State and Zip Code	
	RBlackwell@BVFLaw.com		. .
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please ca	all:	
Richard Blackwell		239 703-7210 at ()	
Name o	of Person	at ()at ()	Telephone Number
Enclosed is a check for t	he 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

(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Comp. Florida document number L0900122514	pany were filed on 12/28/2009 and assign	ned
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	3."
Enter new principal offices address, if applicable:		2 —
Principal office address MUST BE A STREET ADDRES.	<u>s</u>	SSEC SSEC
		
	<i>ज</i>	CORC
Enter new mailing address, if applicable:	<u> </u>	空で
(Mailing address MAY BE A POST OFFICE BOX)		<u>₩</u>
	 	7/5
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		the
registered agent and of the new registered office address		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City 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>	Address	Type of Action
MGR	Lisa Williams	10020 Coconut Road	€ Add
		Suite 138-183	□ Remove
		Bonita Springs, FL 34135	Change
			□ Add
			☐ Remove
			Change
			Remove
			☐ Change
			□ Add
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ective date, if other reffective date is listed,	than the date of the date of the date must be specificated.	filing: ic and cannot be pr	ior to date of filing or	more than 90 days after	onal) r filing.) Pursuant to 60	05.02
te: If the date inserte cument's effective date				ing requirements, this	s date will not be lis	sted
			•			
record specifies	delayed effecti	ve date, but r	not an offective	e time, at 12:01 a	a.m. on the earl	lier
he 90th day afte	r the record is fi)/ /			
ted May 10		2018	/(/			
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Page 3 of 3

Filing Fee: \$25.00