L11000004725

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(Address)					
(Address)					
(City/State/Zip/Phone #)					
(Business Entity Name)					
(Document Number)					
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06/17/19--01034--012 **25.00



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.4			COVER LETTER [®]	
	egistration Se ivision of Cor			
eun heor		A MODERN, LLC		
SUBJECT	·	Name of Lim	ited Liability Company	
The enclose	ed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please retur	rn all correspo	ndence concerning this matter	to the following:	
		HEATHER S. BIRMINGF	łAM	
			Name of Person	
		GOODMAN BREEN		
			Firm/Company	
		3838 TAMIAMI TRAIL N Suite 300	ORTH	
		NAPLES, FLORIDA 341	Address	
		NAFLES, FLOKIDA 541	60	
		gbannual@gmail.com	City/State and Zip Code	
			to be used for future annual report notif	lication)
For further	information c	oncerning this matter, please ca	all:	
HEATHER	R S. BIRMING	SHAM	239 403-3000 at ()	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is	a check for th	ne 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)
	Registr Divisio P.O. Be	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Sectio Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	on rations enter Circle

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ARTICLES OF	AMENDMENT O
-	DRGANIZATION
O	DF The second seco
SARASOTA MODERN, LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records) JUH 17 32 1: 33 Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L11000004725	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	<u>ility company here</u> :
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9530 Cypress Chase Court
(Principal office address MUST BE A STREET ADDRESS)	Ft. Myers. Florida 33967
Enter new mailing address, if applicable:	Post Office Box 1118
(Mailing address MAY BE A POST OFFICE BOX)	Estero, Florida 33929
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, <u>enter the name of the new</u> <u>e</u> :
Name of New Registered Agent:	······································
New Registered Office Address:	
	Enter Florida street address
<u>_</u>	, Florida City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	,
<i>I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete</i>	ee 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. Thereby 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:

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MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
MGR	CAGEY MANAGEMENT SERVICES. INC.	3838 TAMIAMI TRAIL N., #300 NAPLES, FL 34103	Add
			Remove
	RICHARD D. CORBETT	Post Office Box 1118	Change
MGR		Estero, FL 33929	🖬 Add
			Remove
			Change
	·		Add
			Remove
			Change
		<u> </u>	🗆 Add
			Remove
			Change
			Add
		<u> </u>	Remove
		·	Change
			Add
			Remove
			Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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date on the Departmer	it of State's records.			i not be fished as
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es a delayed effect ifter the record is f	ive date, but not. iled.	an effective tir	ne, at 12:01 a.m. on	the earlier of
	2019			
	·	_ ·		
MAN				
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Signature	e of a member or author	zed representative of	à member	
	ited, the date must be speci serted in this block does a date on the Department es a delayed effect fter the record is f	e date on the Department of State's records. es a delayed effective date, but not fter the record is filed.	ted. the date must be specific and cannot be prior to date of filing or more the test in this block does not meet the applicable statutory filing a date on the Department of State's records. es a delayed effective date, but not an effective tim fter the record is filed.	ated. the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Puterted in this block does not meet the applicable statutory filing requirements, this date will be date on the Department of State's records. The set of the Department of State's records. The set of the delayed effective date, but not an effective time, at 12:01 a.m. on after the record is filed.

Kenneth D. Goodman, Authorized Representative

Typed or printed name of signee

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Filing Fee: \$25.00