Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BOND, SCHOENECK & KING, PLLC

Account Number : 120010000122 Phone : (239) 659-3800 : (239)659-3812 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: lenzaiser@azimuthtec.com

LLC AMND/RESTATE/CORRECT @R M/MG RESIGN AZIMUTH TECHNOLOGY, LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Azimuth Technology, LLC		
(Name of the Limited Liability Co (A Florida Limi	moany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp	any were filed on May 2, 2012	and assigned
Florida document number L12000059763		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Market Holdings Naples, LLC		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		····
(Principal office address MUST BE A STREET ADDRESS	2	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		, i.e.
		7 4
		35. 86
B. If amending the registered agent and/or registered	l office address on our records,	enter the name of the ner
registered agent and/or the new registered office address	<u>here</u> :	, The
Name of New Registered Agent:		23.
New Registered Office Address:	Enter Florida street address	
	same a sortina garaga dada ega	
	, Flori	ida
	City	Lip 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, whereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 = M $AMBR = A$	lanager .uthorized Member		
Title	<u>Name</u>	Address	Type of Action
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ective date, if other than the date reflective date is listed, the date must be te: If the date inserted in this block nument's effective date on the Department.	specific and cannot be produced the app	licable statutory filing re-	(optional) than 90 days after filing.) Pr quirements, this date wil	ursuant to 605.02 II not be listed
record specifies a delayed e he 90th day after the recon		not an effective time	e, at 12:01 a.m. on	the earlier
ed August 18	2017	4. 1		
	1/1			

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Filing Fee: \$25.00