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COVER LETTER

то:	Registration Se Division of Cor			#				
orib re		LAKE, LLC		4	r .			
SUBJE	L1;	Name of Lim	ited Liability Company					
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please re	eturn all correspo	ndence concerning this matter	to the following:					
		JON A. HINDEN, ESQUI	RE			_		
			Name of Person		-	~		
		HINDEN, McLEAN & AF	RBEITER, PA					
			Firm√Company				2022	
		4430 SW 64TH AVENUE				RETA	2022 FEB 16 PH 4: 42	ec.
			Address			五元	6	
		DAVIE, FL 33314				SSEE	PH I	
		jhinden@ławhma.com	City/State and Zip Coo	de		TATE FL	_‡ ։ կ2	
For fu rt l	per information c	E-mail address: (oncerning this matter, please c	to be used for future annually	al report notificati	on)			
	linden, Esquire	oneening and mater, presses t	954	587-3058 ext 2				
	Name o	f Person	at () _ Area Code	Daytime Tel	ephone Numbe	r		
Enclose	d is a check for th	ne following amount:						
■ \$2 5	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fe Certified Copy (additional copy is		Certified	ate of Stati		
	Mailing Addres Registration S			Address: stration Section	n			
	Division of C	orporations	Divis	ion of Corpora	ations			
	P.O. Box 632			Centre of Talla		210		
	Tallahassee, I	TL 02014	2413	N. Monroe St	rect, buile è	UIC		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

REXMERE LAKE, LLC						
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records. Liability Company)	()				
The Articles of Organization for this Limited Liability Companification for the Liability Companification of	y were filed on 5/23/2012	and assigned				
This amendment is submitted to amend the following:						
A. If amending name, <u>enter the new name of the limited lia</u>	<u>bility company here</u> :					
The new name must be distinguishable and contain the words "Limited Eash	oility Company," the designation "LLC"	or the abbreyiation #L.C."				
Enter new principal offices address, if applicable:		<u> </u>				
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>				
		- 1				
		OF S				
Enter new mailing address, if applicable:		E. F. L.				
(Mailing address MAY BE A POST OFFICE BOX)		TH 2				
B. If amending the registered agent and/or registered office	address on our records, enter t	he name of the new registere				
agent and/or the new registered office address here:						
Name of New Registered Agent:						
New Registered Office Address:						
	Enter Florida street address					
. <u> </u>	Floi					
	City	Zip Code				

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>	Name	Address	Type of Action
Manager/	James M. Dale, Co-Trustee	11300 Rexmere Blvd.	🗆 Add
		Davie, FL 33325	■Remove
			□Change
Manager/	Bonnie L. Dale, Co-Trustee	11300 Rexmere Blvd.	□Add
		Davie, FL 333258	Remove
			□Change
MGR	Rexmere Lake Village Management,	11300 Rexmere Blvd.	≣ Adđ
	Incorporated	Davie, FL 33325	2022
		_AHA	E B Dhangt
MGR	NAPA Property Development LLC	11300 Rexmere Blvd.	
		Davie, FL 33325	Remove
			□Change
			□Add
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Filing Fee: \$25.00