## L12000145120

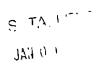
(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

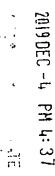
Office Use Only

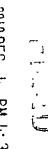


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12/04/19--01009--022 \*\*25.00







## **COVER LETTER**

	Registration S Division of Co		v	,	
emme		FISH HUNTER, LLC	£ .		
SUBJEC	1:	Name of Lin	nited Liability Company		
The enclo	sed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please ret	um all corresp	ondence concerning this matter	to the following:		
		MIKE BAILEY			
			Name of Person		
		NAPLES FISH HUNTER.	. LLC		
		<del> </del>	Firm/Company	<del></del>	
		548 LANDMARK DRIVE	È		
		<del></del>	Address		
	NAPLES FL 34112				
			City/State and Zip Code		
		BAILEYMW1@MSN.COM			
Con Contle			to be used for future annual report no	tification)	
roi luttue	т иногиацов (	concerning this matter, please c	an.		
MIKE BA	MLEY		239 825-4292 at ( )		
	Name (	of Person	Area Code Daytii	me Telephone Number	
Enclosed	is a check for t	he following amount:			
<b>■</b> \$25.0	0 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		Street Address: Registration S	ection		
Division of Corporations			Division of Co		
	P.O. Box 631		The Centre of		
Tallahassee, FL 32314		FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NAPLES FISH HUNTER, LLC			
( <u>Name of the Limi</u>	ted Liability Compa (A Florida Limited)	my as it now appears on our recordiability Company)	<u>ds.</u> )
he Articles of Organization for this Limited L lorida document number <u>L12000145120</u>		were filed on 11/16/2012	and assigned
his amendment is submitted to amend the following	lowing:		
. If amending name, enter the new name o	of the limited liab	ility company here:	
e new name must be distinguishable and contain the	vords "Limited Liabi	lity Company," the designation "LLC	D" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		548 LANDMARK DRIVE	· · · · · · · · · · · · · · · · · · ·
rincipal office address MUST BE A STREI	ET ADDRESS)	NAPLES FL 34112	
			DEC
			<u> </u>
nter new mailing address, if applicable:		548 LANDMARK DRIVE	· P /··
lailing address MAY BE A POST OFFICE	BOX)	NAPLES FL 34112	· F max
			37
. If amending the registered agent and/or tent and/or the new registered office addre		uddress on our records, <u>enter</u>	the name of the new registor
Name of New Registered Agent:	ROBERT HOL	ZINGER	
New Registered Office Address:	548 LANDMA		
		Enter Florida street addre.	SY
	NAPLES	Fi	lorida <u>34112</u>
		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.

Robert Holeiniger

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
MGRM	ROBERTSON, HUNTER H	1210 15TH ST SW	
		NAPLES FL 34117	■Remove
			□ Change
MGRM	HÖLZINGER, RÖBERT	548 LANDMARK DRIVE	<b>≡</b> Add
		NAPLES FL 34112	□ Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Chana

). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
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•	······································
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(If an ef <u>Note:</u>	ive date, if other than the date of filing:  [12/03/2019]  (optional)  (ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
the recordis fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	12/02/2019
	Signature of a member or authorized representative of a member
	MIKE BAILEY
	Typed or printed name of signee